

STATE OF TENNESSEE  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
BUREAU OF TENNCARE

2006 COMPARATIVE ANALYSIS  
OF TENNCARE MANAGED CARE ORGANIZATIONS'  
HEDIS AND CAHPS RESULTS

SEPTEMBER 2006  
FINAL SUMMARY REPORT



200 4<sup>th</sup> Avenue, North, Suite 777  
Nashville, TN 37219

3175 Lenox Park Blvd, Suite 309  
Memphis, TN 38115

---

Phone 888.811.9997 • Fax 615.244.2018

Phone 800.528.2655 • Fax 901.761.3786



## Table of Contents

Acknowledgements and Copyrights .....	3
1. Background.....	4
2. Results.....	12
Plan Performance HEDIS 2005 to HEDIS 2006 .....	12
Statewide Performance .....	17
Plan Performance .....	19
Plan Performance Graphs .....	26
3. Strengths and Opportunities.....	57



## **Acknowledgements and Copyrights** *for HEDIS/CAHPS*

**CAHPS®** refers to the Consumer Assessment of Healthcare Providers and Systems and is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

**HEDIS®** refers to the Health Employer Data and Information Set and is a registered trademark of the National Committee for Quality Assurance (NCQA).

**NCQA HEDIS Compliance Audit™** is a trademark of NCQA.



## 1. Background for HEDIS/CAHPS

### *HEDIS*

HEDIS is an important tool designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed health care plans. NCQA-certified auditors use standard audit methodologies to ensure the integrity of measure reporting which help purchasers to make more reliable "apples-to-apples" comparisons between health plans. HEDIS measures are subject to an NCQA HEDIS Compliance Audit™ which must be conducted by an NCQA-certified HEDIS Compliance Auditor under the auspices of an NCQA-licensed organization. The purpose of the NCQA HEDIS Compliance Audit is to ensure the integrity of the HEDIS collection and calculation process through an overall information systems capabilities assessment followed by an evaluation of the MCO's ability to comply with HEDIS specifications.

HEDIS 2006 contains 67 measures across the following 8 domains of care:

- Effectiveness of Care
- Access/Availability of Care
- Satisfaction With the Experience of Care
- Health Plan Stability
- Use of Services
- Cost of Care
- Informed Health Care Choices
- Health Plan Descriptive Information

### *CAHPS 3.0H Medicaid Survey*

The CAHPS 3.0H survey is a tool for measuring consumer health care satisfaction with the quality of care and customer service provided by their health plans. Topics included in the CAHPS 3.0H Survey include:

- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Courteous and Helpful Office Staff
- Customer Service
- Provider and Plan Ratings
- Effectiveness of Care Measure (Medical Assistance with Smoking Cessation)

The CAHPS 3.0H survey must be administered by an NCQA-certified survey vendor using an NCQA-approved protocol of administration in order to ensure that results are collected in a standardized way and can be compared across plans. Standard NCQA protocols for



administering CAHPS 3.0H include a mixed-model mail/telephone protocol and a mail-only protocol. The surveys contained within this domain are designed to provide standardized information about members' experiences with their MCOs. NCQA worked with AHRQ to develop these surveys. For a plan's results to be considered reliable, the Medicaid MCO must follow one of the standard HEDIS/CAHPS 3.0H protocols or an enhanced protocol approved by NCQA, or must achieve a 45 percent response rate using an alternative protocol. For more detail regarding this calculation methodology and the questions used in each composite, see *HEDIS 2003, Volume 3: Specifications for Survey Measures*, pp. 189–233. MCO results from the CAHPS 3.0H Adult, CAHPS 3.0H Child (with and without Children with Chronic Conditions) Surveys were evaluated for this report.

### *Domains of Care and HEDIS Measure Descriptions*

The following text provides a brief description of each Domain of Care and HEDIS measure addressed in this report. Descriptions were extracted from NCQA's *HEDIS 2004 Volume 1: Narrative* and NCQA's *HEDIS 2006 Volume 2: Technical Specifications*. Additional information related to each domain or measure can be found in these publications.

#### *Effectiveness of Care Measures*

The Effectiveness of Care domain contains measures that look at the clinical quality of care delivered within an MCO. Measures in this domain address four aspects of care:

1. How well the MCO delivers preventive services and keeps its members healthy
2. Whether the most up-to-date treatments are being offered to treat acute episodes of illness and help members get better
3. The process by which care is delivered to people with a chronic disease and how well the MCO's health care delivery system helps members cope with illness
4. Whether appropriate treatment and/or testing was provided to members

#### *Childhood Immunizations*

The percentage of enrolled children 2 years of age who had four DtaP/DT, three IPV, one MMR, three H influenza type B, three hepatitis B, one chicken pox vaccine (VZV) and four pneumococcal conjugate vaccines by their second birthday. The measure calculates a rate for each vaccine and two separate combination rates.

#### *Adolescent Immunizations*

The percentage of enrolled adolescents 13 years of age who had a second dose of MMR, three hepatitis B and one chicken pox (VZV) by their 13th birthday. The measure calculates a rate for each vaccine and one combination rate.

#### *Appropriate Treatment for Children with Upper Respiratory Infection*

The percentage of children 3 months–18 years of age who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the date of service.



#### *Appropriate Treatment for Children with Pharyngitis*

The percentage of children 2–18 years of age, who were diagnosed with pharyngitis, prescribed an antibiotic and received a group A streptococcus test for the episode. A higher rate represents better performance (i.e., appropriate testing).

#### *Inappropriate Antibiotic Treatment for Adults with Acute Bronchitis*

The percentage of healthy adults 18–64 years of age with a diagnosis of acute bronchitis who were dispensed an antibiotic prescription on or within three days after the date of service.

Antibiotics are not indicated in clinical guidelines for the treatment of adults with acute bronchitis who do not have a comorbidity or other infection for which antibiotics may be appropriate. This misuse measure assesses if antibiotics were inappropriately prescribed for healthy adults with acute bronchitis. A lower rate represents better performance.

#### *Colorectal Cancer Screening*

The percentage of adults 50–80 years of age who had appropriate screening for colorectal cancer. The hybrid method is recommended to calculate this measure.

#### *Breast Cancer Screening*

The percentage of women 50–69 years of age who had a mammogram during the measurement year or the year prior to the measurement year.

#### *Cervical Cancer Screening*

The percentage of women 18–64 years of age who received one or more Pap tests during the measurement year or the two years prior to the measurement year.

#### *Chlamydia Screening in Women*

The percentage of women 16–25 years of age who were identified as sexually active that had at least one test for Chlamydia during the measurement year.

#### *Controlling High Blood Pressure*

The percentage of enrolled members 46–85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled ( $\leq 140/90$ ) during the measurement year. This intermediate outcome measure assesses if BP was controlled among adults with diagnosed HTN. The MCO must use the hybrid method for this measure.

#### *Beta-Blocker Treatment after a Heart Attack*

The percentage of enrolled members 35 years of age and older during the measurement year who were hospitalized and discharged alive from January 1–December 24 of the measurement year with a diagnosis of acute myocardial infarction (AMI) and who received an ambulatory prescription for beta-blockers upon discharge. The intent of this measure is to assess whether appropriate follow-up care has been rendered to members who suffer a heart attack.



### *Persistence of Beta-Blocker Treatment after a Heart Attack*

The percentage of enrolled members 35 years of age and older during the measurement year who were hospitalized and discharged alive from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of acute myocardial infarction and who received persistent beta-blocker treatment.

MCOs will report the percentage of members who receive treatment with beta-blockers for six months after discharge.

### *Comprehensive Diabetes Care*

The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had each of the following:

- hemoglobin A1c (HbA1c) testing during the measurement year
- HbA1c poorly controlled (>9.0%) for the most recent HbA1c test during the measurement year
- eye exam (retinal or dilated) performed in the measurement year or a negative retinal exam (no evidence of nephropathy) in the year prior to the measurement year
- LDL-C screening performed during the measurement year or year prior to the measurement year
- LDL-C controlled (<130 mg/dL) for the most recent LDL-C screening during the measurement year or year prior to the measurement year
- LDL-C controlled (<100 mg/dL) for the most recent LDL-C screening during the measurement year or year prior to the measurement year
- kidney disease (nephropathy) monitored – positive numerators include members who have been screened for microalbumin, or members who have nephropathy, a visit to a nephrologist or a positive urine macroalbumin test. Urine microalbumin tests include: 24-hour urine for microalbumin, timed urine for microalbumin, spot urine for microalbumin, or microalbumin/creatinine ratio. Urine macroalbumin or protein tests include: positive urinalysis (timed, spot, microalbumin/creatinine ratio), positive urine dipstick, positive tablet reagent. “Trace” urine macroalbumin test results are not considered numerator compliant.

### *Use of Appropriate Medications for People with Asthma*

The percentage of enrolled members 5–56 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year. Preferred medications include the following medication classes: cromolyn sodium, leukotriene modifiers, nedocromil, inhaled corticosteroids, and methylxanthines. The class, long-acting inhaled beta-2 agonists, does not count toward the numerator because it is recommended as an add-on rather than primary therapy for persistent asthma.



### *Medical Assistance with Smoking Cessation*

This measure is collected using the survey methodology. The following components of this measure assess different facets of providing medical assistance with smoking cessation:

- Advising Smokers to Quit – A rolling average represents the percentage of members 18 years of age and older who are current smokers and were seen by an MCO practitioner during the measurement year and who received advice to quit smoking.
- Discussing Smoking Cessation Medications – A rolling average represents the percentage of members 18 years of age and older who are current smokers and were seen by an MCO practitioner during the measurement year and for whom smoking cessation medications were recommended or discussed.
- Discussing Smoking Cessation Strategies – A rolling average represents the percentage of members 18 years of age and older who are current smokers and were seen by an MCO practitioner during the measurement year and for whom smoking cessation methods or strategies were recommended or discussed.

### *Access / Availability of Care Measures*

The measures in the Access / Availability of Care domain evaluate how members access important and basic services of their MCO. Included are measures of overall access and how many members are actually using basic MCO services, and the use and availability of specific services.

#### *Adults' Access to Preventive / Ambulatory Health Services*

The percentage of enrollees 20–44, 45–64 and 65 years of age and older who had an ambulatory or preventive care visit. Nine separate rates are calculated, one for each of the three product lines for each of the three age groups. The MCO reports the percentage of:

- Medicaid and Medicare enrollees who had an ambulatory or preventive care visit during the measurement year
- commercial enrollees who had an ambulatory or preventive care visit during the measurement year or the two years prior to the measurement year.

#### *Children and Adolescents' Access to Primary Care Practitioners*

The percentage of enrollees 12–24 months, 25 months–6 years, 7–11 years and 12–19 years of age who had a visit with an MCO primary care practitioner. The MCO reports four separate percentages for each product line:

- children 12–24 months and 25 months–6 years of age who had a visit with an MCO primary care practitioner during the measurement year





- children 7–11 and adolescents 12–19 years of age who had a visit with an MCO primary care practitioner during the measurement year or the year prior to the measurement year.

### *Prenatal and Postpartum Care*

The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care:

- *Timeliness of Prenatal Care.* The percentage of deliveries that received a prenatal care visit as a member of the MCO in the first trimester *or* within 42 days of enrollment in the MCO.
- *Postpartum Care.* The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.

### *Use of Services Measures*

The Use of Services domain discusses what services an MCO provides for its population. Information about how MCOs manage the provisions of care is addressed by the measures in this domain. Typically, measures in this domain are expressed as rates of service, such as per 1,000 member months or years, or as the percentage of members who received a particular service.

### *Frequency of Ongoing Prenatal Care*

The percentage of Medicaid deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year and received <21 percent, 21–40 percent, 41–60 percent, 61–80 percent or ≥81 percent of the expected number of prenatal care visits, adjusted for gestational age and the month that the member enrolled in the MCO. This measure uses the same denominator and deliveries as the Prenatal and Postpartum Care measure.

For these deliveries, the MCO:

- identifies the actual number of prenatal care visits rendered while they were enrolled in the MCO
- identifies the number of expected visits
- calculates the ratio of received-to-expected visits
- reports an unduplicated count of deliveries that had <21 percent, 21–40 percent, 41–60 percent, 61–80 percent or ≥81 percent of the number of expected visits, adjusted for the month the member enrolled in the MCO and gestational age. The MCO reports five rates.



### *Well-Child Visits in the First 15 Months of Life*

The percentage of enrolled members who turned 15 months old during the measurement year and who had the following number of well-child visits with a primary care practitioner during their first 15 months of life: zero, one, two, three, four, five, six or more.

### *Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life*

The percentage of members who were three, four, five or six years of age during the measurement year who received one or more well-child visits with a primary care practitioner during the measurement year.

### *Adolescent Well-Care Visits*

The percentage of enrolled members who were 12–21 years of age and who had at least one comprehensive well-care visit with a primary care practitioner or an OB/GYN practitioner during the measurement year.

## *CAHPS 3.0H Medicaid Survey*

The CAHPS 3.0H core survey components include 5 composite categories. Each composite category represents an overall aspect of plan quality and is comprised of similar questions. For each composite, an overall score is computed. Composites are comprised of two or more questions about a similar topic, measured on the same scale. CAHPS questions used in composites are scaled in one of two ways:

- Getting Needed Care and Health Plan Customer Service
  - Not a Problem
  - A Small Problem
  - A Big Problem
- Getting Care Quickly, Doctors Who Communicate Well, and Courteous and Helpful Office Staff
  - Never
  - Sometimes
  - Usually
  - Always

For any given question used in a composite, the percentage of respondents answering in a certain way is calculated for each plan. Summary rates represent the percentage of members who responded in the most positive way, as defined by NCQA. The following provides a brief description of the 5 composite categories and 4 additional questions and the scoring methodology for each.



### *Getting Needed Care*

The Getting Needed Care composite measures the experiences members had in the last six months when attempting to get care from doctors and specialists. The summary rate represents the percentage of members who responded 'Not a Problem.'

### *Getting Care Quickly*

The Getting Care Quickly composite measures the member's experiences with receiving care or advice in a reasonable time and includes experiences with time spent in the office waiting room. The summary rate represents the percentage of members who responded 'Always' or 'Usually.'

### *How Well Doctors Communicate*

The How Well Doctors Communicate composite measures how well providers listen, explain, spend enough time with, and show respect for what members have to say. The summary rate represents the percentage of members who responded 'Always' or 'Usually.'

### *Courteous and Helpful Office Staff*

The Courteous and Helpful Office Staff composite measures the member's treatment by office staff in the last six months. The summary rate represents the percentage of members who responded 'Always' or 'Usually.'

### *Health Plan Customer Service*

The Health Plan Customer Service composite measures how much of a problem it was for members to get information and get help from customer service in the last six months. The summary rate represents the percentage of members who responded 'Not a Problem.'

There are four additional questions with responses scaled 0 to 10 in the CAHPS 3.0H survey: Rating of Doctor, Rating of Specialist, Rating of Health Care, and Rating of Health Plan. Zero represents 'worst possible' and 10 represents 'best possible.' The summary rate represents the percentage of respondents who rated the question 9 or 10.



## 2. Results

for HEDIS/CAHPS

### *Plan Performance HEDIS 2005 to HEDIS 2006*

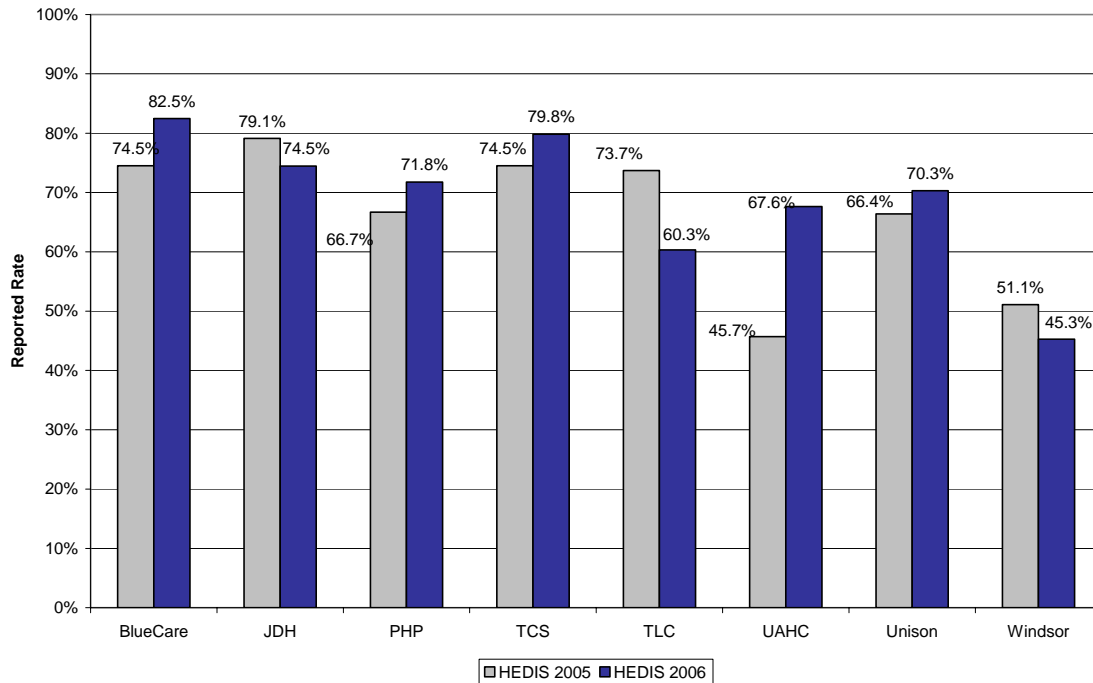
TennCare MCOs first submitted audited HEDIS results for seven required HEDIS measures (Childhood Immunization Status Combo 2, Adolescent Immunization Status Combo 2, Breast Cancer Screening, Cervical Cancer Screening, Comprehensive Diabetes Care – HbA1c Testing, and Timeliness of Prenatal Care and Postpartum Care) and one optional measure (Chlamydia Screening) in 2005. The statewide changes for seven measures reported during both HEDIS 2005 and HEDIS 2006 are presented in Table 2-1. Individual plan performance scores and changes from HEDIS 2005 to HEDIS 2006 for the seven required measures are presented graphically following Table 2-1.

**Table 2-1 Statewide Measurement Rates for  
HEDIS 2005 to HEDIS 2006 Measures**

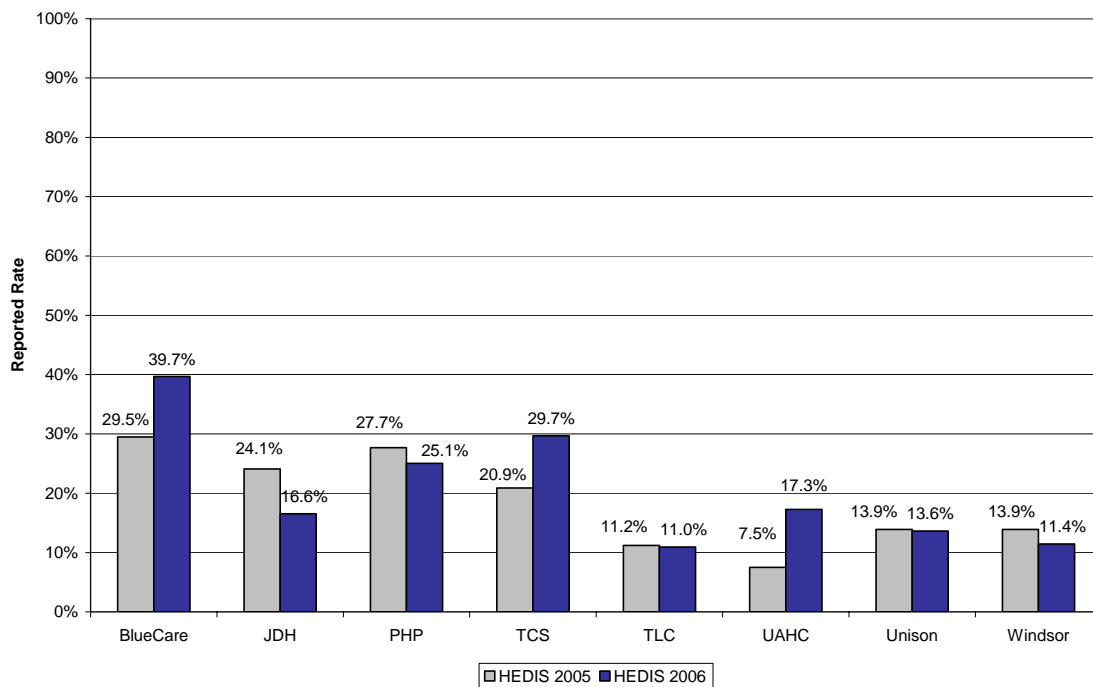
Measure	HEDIS 2005	HEDIS 2006	Change
Childhood Immunization Status: Combo 2	73.0%	73.4%	↑
Adolescent Immunization Status: Combo 2	19.6%	25.0%	↑
Breast Cancer Screening	40.7%	50.2%	↑
Cervical Cancer Screening	54.1%	60.9%	↑
Comprehensive Diabetes Care - HbA1c Testing	67.4%	70.7%	↑
Prenatal and Postpartum Care - Timeliness of Prenatal Care	70.6%	75.6%	↑
Prenatal and Postpartum Care - Postpartum Care	54.7%	58.2%	↑



### TennCare Childhood Immunization Status Combo 2: HEDIS 2005 to HEDIS 2006

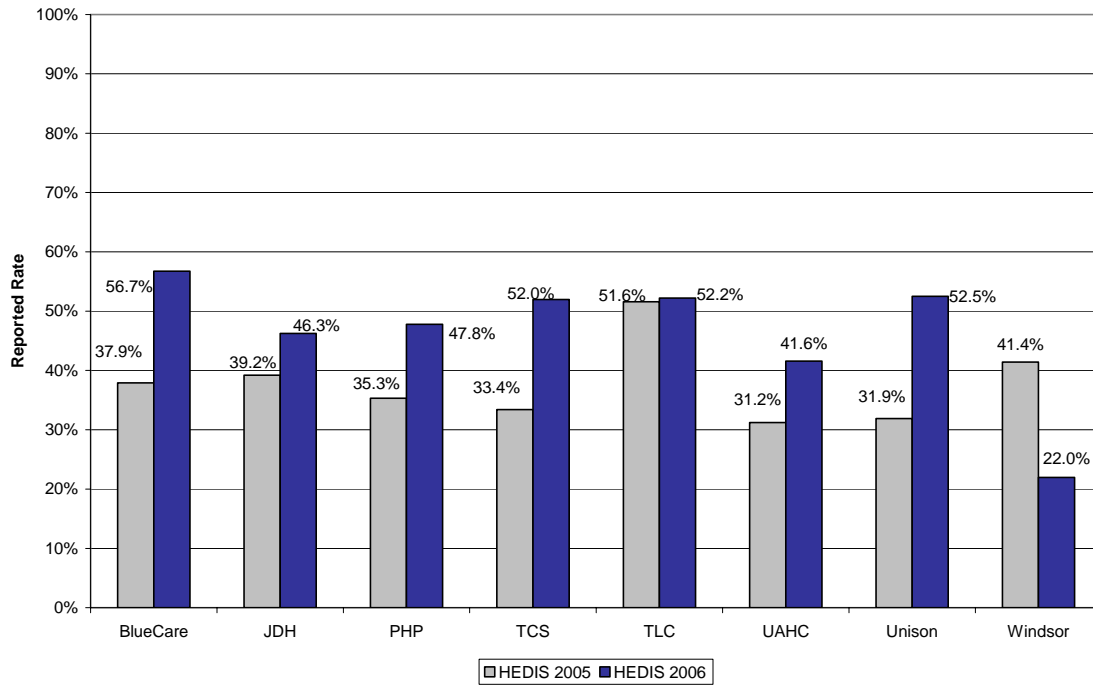


### TennCare Adolescent Immunization Status Combo 2: HEDIS 2005 to HEDIS 2006

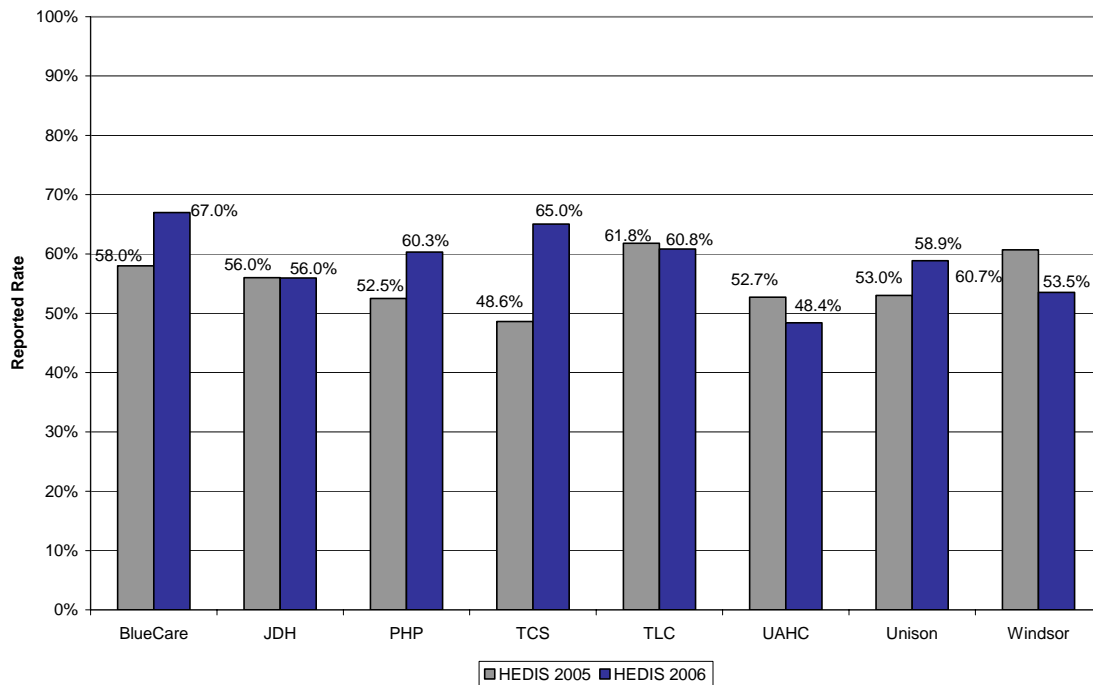




### TennCare Breast Cancer Screening: HEDIS 2005 to HEDIS 2006

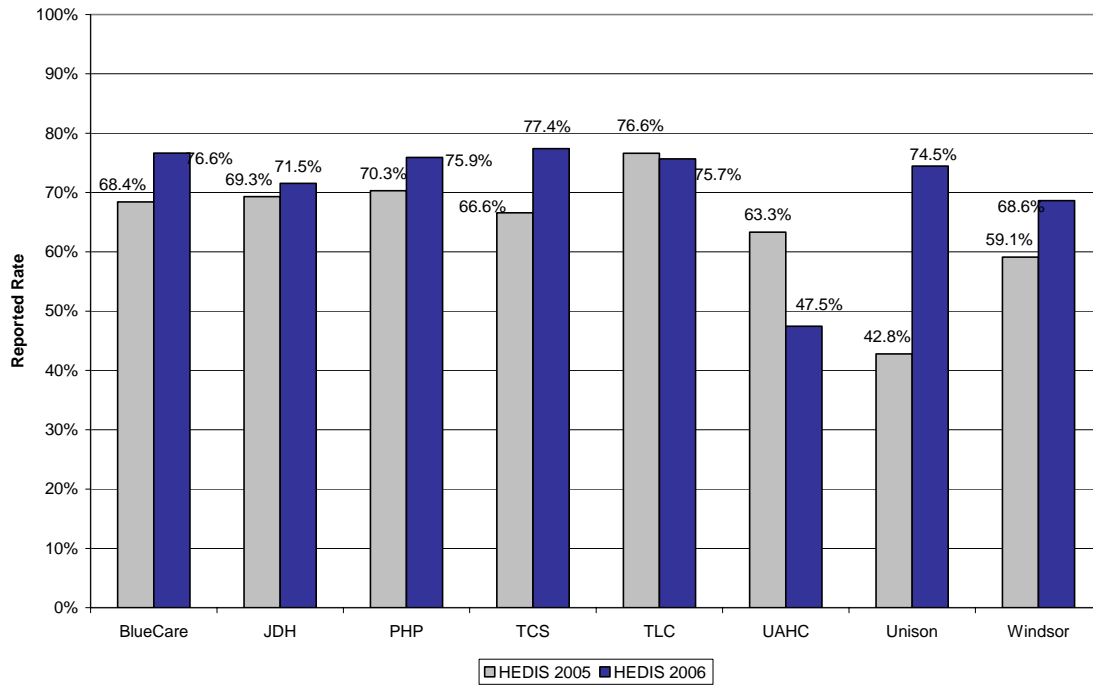


### TennCare Cervical Cancer Screening: HEDIS 2005 to HEDIS 2006

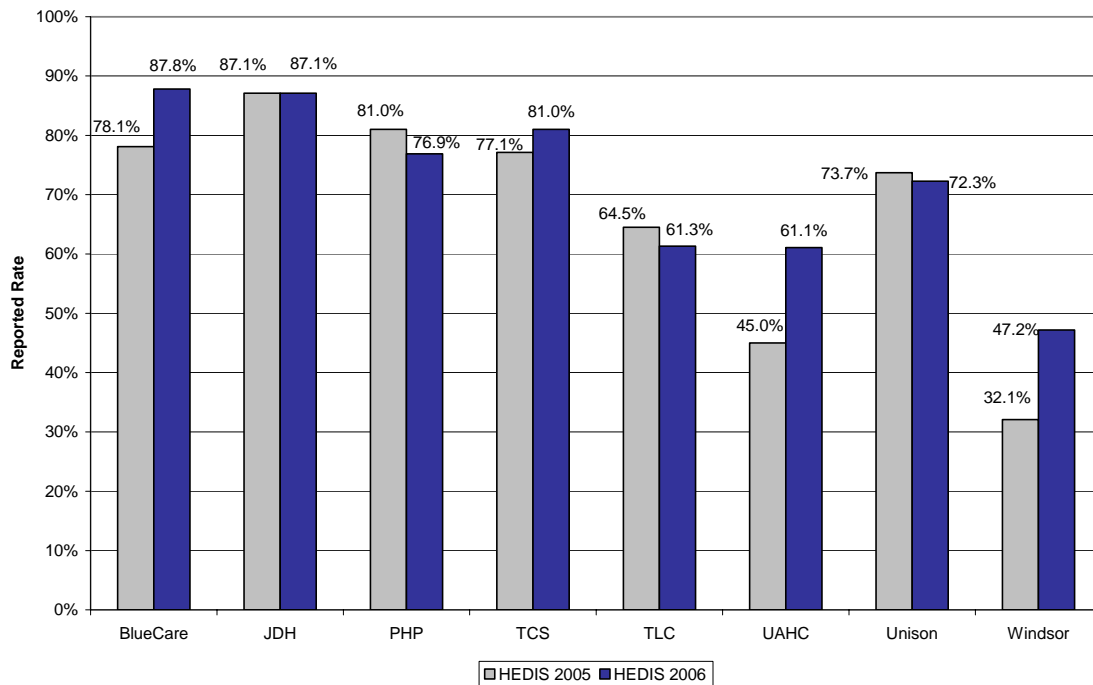




### TennCare Comprehensive Diabetes Care - HbA1c Testing: HEDIS 2005 to HEDIS 2006

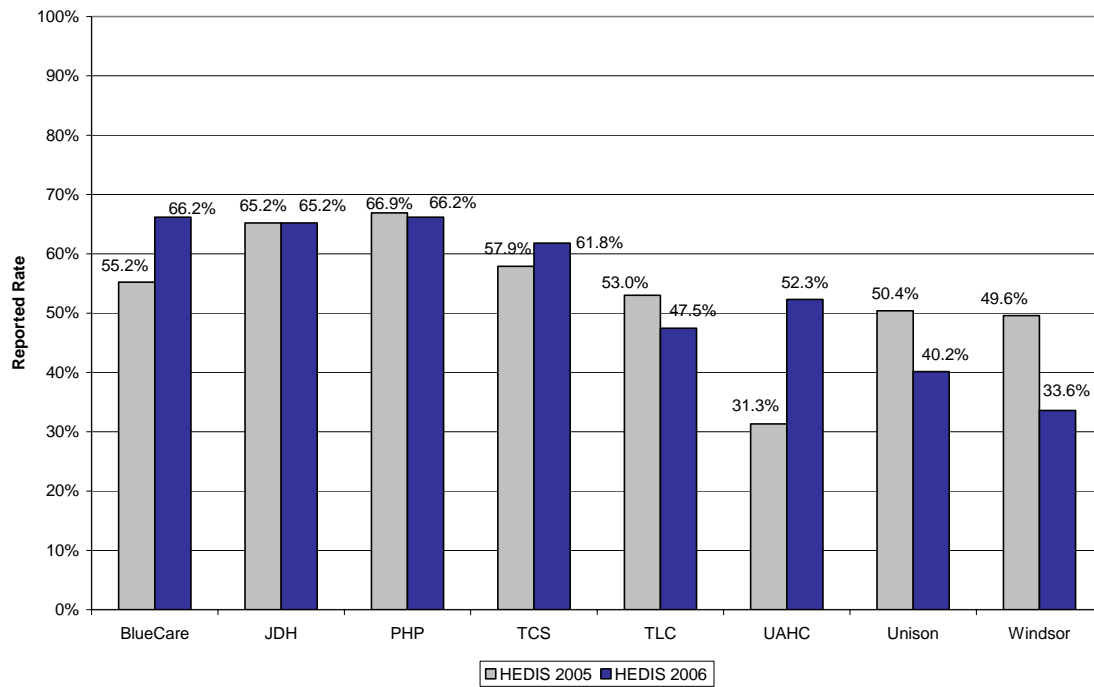


### TennCare Timeliness of Prenatal Care: HEDIS 2005 to HEDIS 2006





### TennCare Postpartum Care: HEDIS 2005 to HEDIS 2006







## Statewide Performance

Table 2-2, Table 2-3, and Table 2-4 summarize the weighted average TennCare score for each of the selected HEDIS Measures as well as the 2005 Medicaid National Average. The weighted averages were achieved by applying the size of the eligible population within each plan to their overall results achieved. Using this methodology, plan specific findings can be estimated from an overall TennCare statewide level, with each plan contributing to the statewide estimate proportionate to its eligible population size.

<b>Table 2-2 Statewide Weighted Rates for HEDIS 2006 Effectiveness of Care Measures</b>			
<b>Measure</b>	<b>Statewide Weighted Rate</b>	<b>HEDIS 2005 Medicaid National Average</b>	<b>Above ( ) or Below ( ) National Average</b>
<b>Childhood Immunization Status:</b>			
DtaP/DT	79.2%	75.5%	↑
IPV	89.2%	84.7%	↑
MMR	90.2%	88.1%	↑
HiB	89.7%	78.8%	↑
Hepatitis B	89.7%	81.7%	↑
VZV	89.4%	84.8%	↑
Pneumococcal Conjugate	49.2%	**	**
Combination 2	73.4%	62.9%	↑
Combination 3	44.3%	**	**
<b>Adolescent Immunization Status:</b>			
MMR	69.1%	71.2%	↓
Hepatitis B	60.7%	60.6%	↑
VZV	29.9%	46.3%	↓
Combination 2	25.0%	37.5%	↓
<b>Inappropriate Antibiotic Treatment for Adults with Acute Bronchitis</b>	70.1%	**	**
<b>Chlamydia Screening in Women</b>			
16-20 year old women	48.9%	45.5%	↑
21-25 year old women	52.2%	48.3%	↑
Total Rate	50.5%	46.5%	↑
<b>Beta-Blocker Treatment After a Heart Attack</b>	86.1%	85.0%	↑
<b>Persistence of Beta Blocker Treatment After a Heart Attack</b>	70.5%	69.5%	↑
<b>Appropriate Treatment of Children with Upper Respiratory Infection</b>	72.4%	79.2%	↓
<b>Appropriate Testing for Children with Pharyngitis</b>	64.5%	54.4%	↑
<b>Breast Cancer Screening</b>	50.2%	53.6%	↓
<b>Cervical Cancer Screening</b>	60.9%	64.4%	↓
<b>Controlling High Blood Pressure</b>	56.5%	61.5%	↓

**Table 2-2 Statewide Weighted Rates for HEDIS 2006  
Effectiveness of Care Measures**

Measure	Statewide Weighted Rate	HEDIS 2005 Medicaid National Average	Above ( ) or Below ( ) National Average
<b>Comprehensive Diabetes Care</b>			
HbA1c Testing	70.7%	74.7%	↓
HbA1c Poorly Controlled (>9.0%)	58.9%	50.1%	↑*
Retinal Eye Exam Performed	33.0%	43.9%	↓
LDL-C Screening Performed	76.9%	78.2%	↓
LDL-C Controlled (<130 mg/dL)	39.4%	50.0%	↓
LDL-C Controlled (<100 mg/dL)	24.1%	29.9%	↓
Nephropathy Monitored	32.4%	45.5%	↓
<b>Use of Appropriate Medications for People with Asthma</b>			
5-9 year olds	91.2%	62.9%	↑
10-17 year olds	89.1%	61.8%	↑
18-56 year olds	85.8%	64.2%	↑
Total Rate	87.7%	63.8%	↑
<b>Medical Assistance with Smoking Cessation Strategies (survey measure)</b>			
Advise	63.9%	**	**
Medication	26.4%	**	**
Strategies	27.9%	**	**

\*A lower rate indicated better performance; a rate above the national average is a worse result than a rate below the national average. \*\*Comparison data not available.

**Table 2-3 Statewide Weighted Rates for HEDIS 2006  
Access/Availability Measures**

Measure	Statewide Weighted Rate	HEDIS 2005 Medicaid National Average	Above ( ) or Below ( ) National Average
<b>Prenatal and Postpartum Care</b>			
Timeliness of Prenatal Care	75.6%	78.4%	↓
Postpartum Care	58.2%	56.0%	↑
<b>Adult Access to Preventive/Ambulatory Health Services</b>			
20-44 year olds	72.1%	75.8%	↓
45-64 year olds	75.4%	81.1%	↓
65 +	33.9%	79.8%	↓
<b>Children and Adolescents' Access to Primary Care Practitioners</b>			
12-24 months	93.6%	92.0%	↑
25 months – 6 years	83.4%	81.6%	↑
7-11 years	85.1%	82.5%	↑
12-19 years	80.9%	79.1%	↑



**Table 2-4 Statewide Weighted Rates for HEDIS 2006  
Use of Services Measures**

Measure	Statewide Weighted Rate	HEDIS 2005 Medicaid National Average	Above (↑) or Below (↓) National Average
<b>Frequency of Ongoing Prenatal Care</b>			
<21 percent	20.6%	19.2%	↑
21-40 percent	7.9%	6.5%	↑
41-60 percent	8.8%	7.8%	↑
61-80 percent	13.1%	13.9%	↓
>= 81 percent	49.8%	51.0%	↓
<b>Well Child Visits in the First 15 Months of Life</b>			
0 Visits	6.0%	6.2%	↓
1 Visit	5.8%	4.2%	↑
2 Visits	6.7%	5.1%	↑
3 Visits	10.1%	7.9%	↑
4 Visits	15.6%	12.9%	↑
5 Visits	21.2%	18.7%	↑
6 Visits	34.8%	45.0%	↓
Well-Child Visits in the Third, Fourth, and Sixth Years of Life	57.5%	62.0%	↓
Adolescent Well-Care Visits	33.5%	39.3%	↓

## Plan Performance

The purpose of this section is to provide an overview of individual plan performance using appropriate available comparison data. The results highlight those areas where each MCO is performing in relation to the national Medicaid HEDIS 2005 percentiles for select, highly relevant MCO reported HEDIS measures. For the CAHPS 3.0H performance scores, the National CAHPS Benchmarking Database for the Adult Medicaid and Child Medicaid populations means are provide for comparison purposes. There were no comparison data available for the Children with Chronic Conditions (CCC) population in this data source therefore comparisons are made against the statewide average.

Ratings were determined based on the HEDIS 2005 Medicaid Means, Percentiles, and Ratios. The data are shown, for each measure, and include the mean rate and the rate for each percentile from 10 to 90. These data are used for auditor evaluation of health plans' current rates and enrollment counts to previous year. QSource uses these data to determine overall TennCare plan performance to the highest and lowest percentiles. For some measures, such as Comprehensive Diabetes Care – HbA1c poorly controlled (> 9.0%), a lower rate indicated better performance. Therefore, a rate in the 10<sup>th</sup> percentile is better than a rate in the 90<sup>th</sup> percentile. **Table 2-5: Rating Determination** details the MCO percentile rating scale.



<b>Table 2-5: Rating Determination</b>	
<b>Percentile MCO Achieved</b>	<b>Color Designation</b>
<b>75<sup>th</sup> – 100<sup>th</sup></b>  (at or above national average for Adult and Child CAHPS or statewide average for Children with Chronic Conditions Survey)	
<b>25<sup>th</sup> to 75<sup>th</sup></b>	
<b>Less than 25<sup>th</sup></b>	
<b>NR=</b>	The measure was not reported (NR) to the MCO. Therefore these measures were not covered under the scope of the HEDIS audit.
<b>NA=</b>	The measure was not applicable (NA) because there were less than 100 valid responses.
<b>No Comparison Data Available</b>	

Table 2-6 through Table 2-8 display the plan specific performance rates and color coded indicator for each measure selected from the Effectiveness of Care, Access/Availability of Care, and Use of Services domains. Tables 2-9 through 2-11 display the plan specific performance rate for the CAHPS 3.0H survey results.



**Table 2-6 Plan Performance Measures for Effectiveness of Care Measures**

Measure	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor
<b>Childhood Immunization Status</b>								
DtaP/DT	86.6%	81.0%	77.4%	84.4%	68.9%	74.5%	76.4%	55.7%
IPV	95.6%	90.0%	89.3%	92.7%	79.6%	87.8%	86.4%	70.6%
MMR	94.6%	89.8%	90.8%	91.2%	87.3%	87.8%	87.1%	78.6%
HiB	96.8%	89.5%	90.5%	92.9%	81.5%	86.4%	83.9%	73.7%
Hepatitis B	96.6%	89.5%	91.0%	94.2%	79.3%	85.6%	86.4%	69.6%
VZV	92.2%	88.3%	89.3%	91.5%	86.9%	86.4%	86.6%	77.6%
Pneumococcal Conjugate**	58.4%	51.6%	49.9%	55.5%	38.2%	34.3%	44.0%	40.9%
Combination 2	82.5%	74.5%	71.8%	79.8%	60.3%	67.6%	70.3%	45.3%
Combination 3**	54.0%	45.7%	45.0%	51.8%	32.8%	27.5%	37.7%	29.9%
<b>Adolescent Immunization Status</b>								
MMR	92.9%	40.9%	52.3%	83.7%	42.8%	59.1%	44.3%	45.7%
Hepatitis B	85.2%	37.5%	50.6%	71.5%	32.6%	55.0%	40.1%	40.6%
VZV	44.0%	22.9%	30.7%	33.3%	18.7%	21.2%	20.0%	16.5%
Combination 2	39.7%	16.6%	25.1%	29.7%	11.0%	17.3%	13.6%	11.4%
Inappropriate Antibiotic Treatment for Adults with Acute Bronchitis**	77.9%	75.2%	72.1%	77.0%	62.3%	20.1%	74.2%	72.4%
<b>Chlamydia Screening in Women</b>								
16-20 year old women	44.7%	43.6%	36.5%	47.1%	55.6%	58.8%	57.3%	55.9%
21-25 year old women	47.4%	47.0%	40.4%	49.4%	59.1%	61.8%	59.6%	59.1%
Total Rate	46.0%	45.3%	38.4%	48.2%	57.5%	60.4%	58.4%	57.7%
Beta-Blocker Treatment After a Heart Attack	84.3%	87.5%	95.0%	87.7%	79.8%	NR	63.3%	NA
Persistence of Beta-Blocker Treatment After a Heart Attack	80.0%	66.7%	70.9%	76.7%	44.4%	NR	NA	NR
Appropriate Treatment of Children with Upper Respiratory Infection	70.5%	74.7%	74.2%	71.3%	65.5%	90.5%	66.0%	91.9%
Appropriate Testing for Children with Pharyngitis	67.0%	66.5%	59.5%	65.5%	59.1%	63.4%	60.5%	76.9%
Breast Cancer Screening	56.7%	46.3%	47.8%	52.0%	52.2%	41.6%	52.5%	22.0%
Cervical Cancer Screening	67.0%	56.0%	60.3%	65.0%	60.8%	48.4%	58.9%	53.5%
Controlling High Blood Pressure	57.2%	54.3%	58.9%	58.6%	53.5%	NR	43.1%	NR



**Table 2-6 Plan Performance Measures for Effectiveness of Care Measures**

Measure	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor
<b>Comprehensive Diabetes Care</b>								
HbA1c Testing	76.6%	71.5%	75.9%	77.4%	75.7%	47.5%	74.5%	68.6%
HbA1c Poorly Controlled (>9.0%)*	47.0%	56.0%	42.8%	51.8%	62.5%	89.1%	58.6%	64.0%
Retinal Eye Exam Performed	38.4%	27.3%	36.0%	38.2%	33.1%	21.2%	29.4%	24.3%
LDL-C Screening Performed	84.4%	81.8%	83.5%	82.7%	80.1%	52.6%	80.1%	70.6%
LDL-C Controlled (<130 mg/dL)	45.5%	44.8%	53.5%	44.5%	38.7%	16.1%	38.2%	42.1%
LDL-C Controlled (<100 mg/dL)	29.4%	27.7%	33.1%	27.3%	23.8%	7.5%	23.4%	24.6%
Nephropathy Monitored	31.1%	39.4%	36.7%	34.3%	30.2%	26.0%	29.4%	49.4%
<b>Use of Appropriate Medications for People with Asthma</b>								
5-9 year olds	97.1%	97.6%	96.7%	92.9%	86.0%	74.6%	87.4%	86.7%
10-17 year olds	94.2%	95.9%	94.0%	89.1%	84.6%	74.8%	92.2%	88.4%
18-56 year olds	90.5%	90.9%	89.0%	88.2%	79.3%	67.5%	90.9%	71.7%
Total	92.5%	93.0%	91.7%	89.4%	82.0%	70.8%	90.5%	80.3%
<b>Medical Assistance with Smoking Cessation (survey measure)**</b>								
Advising Smokers to Quit	71.0%	66.3%	60.2%	69.7%	NA	NA	56.5%	60.0%
Discussing Smoking Cessation Medications	29.7%	24.2%	24.6%	28.0%	NA	NA	24.2%	27.6%
Discussing Smoking Cessations Strategies	35.8%	28.1%	24.2%	31.6%	NA	NA	22.0%	26.0%

\*A lower rate indicated better performance; a rate in the 10<sup>th</sup> percentile is a better result than a rate in the 90<sup>th</sup> percentile.

\*\*Comparison data not available.

**Table 2-7 Access / Availability of Care Measures**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor
<b>Prenatal and Postpartum Care</b>								
Timeliness of Prenatal Care	87.8%	87.1%	76.9%	81.0%	61.3%	61.1%	72.3%	47.2%
Postpartum Care	66.2%	65.2%	66.2%	61.8%	47.5%	52.3%	40.2%	33.6%
<b>Adults Access to Preventive/Ambulatory Health Services</b>								
20-44 year olds	79.7%	71.7%	73.9%	75.3%	73.7%	57.3%	70.6%	47.7%
45-64 year olds	87.2%	77.2%	78.1%	83.9%	79.6%	48.4%	79.2%	41.0%
65 +	65.6%	36.0%	26.3%	61.6%	59.0%	33.9%	67.9%	8.3%



**Table 2-7 Access / Availability of Care Measures**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor
<b>Children and Adolescents' Access to Primary Care Practitioners</b>								
12-24 months	95.4%	87.1%	95.0%	94.2%	92.8%	92.8%	94.4%	90.7%
25 months - 6 years	86.2%	78.6%	85.8%	84.0%	83.5%	79.8%	83.7%	78.1%
7-11 years	90.3%	83.1%	89.3%	85.7%	83.3%	77.8%	84.4%	79.0%
12-19 years	87.6%	80.8%	87.7%	80.6%	78.4%	70.5%	84.3%	76.6%

**Table 2-8 Use of Services Measures**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor
<b>Frequency of Ongoing Prenatal Care</b>								
<21 percent	7.5%	80.2%	14.6%	16.3%	25.5%	29.9%	20.9%	NR
21-40 percent	5.4%	15.2%	3.6%	5.4%	14.4%	10.2%	10.5%	NR
41-60 percent	6.6%	3.3%	2.7%	9.5%	12.4%	12.2%	7.8%	NR
61-80 percent	14.4%	0.8%	7.3%	14.4%	15.3%	12.4%	13.4%	NR
>= 81 percent	66.2%	0.5%	71.8%	54.5%	32.4%	35.3%	47.5%	NR
<b>Well-Child Visits in the First 15 Months of Life</b>								
0 Visits	5.1%	10.0%	3.2%	7.0%	4.6%	7.3%	2.4%	NR
1 Visit	5.6%	5.6%	3.3%	6.3%	5.8%	6.6%	3.7%	NR
2 Visits	7.1%	5.3%	4.4%	7.7%	6.1%	6.3%	4.4%	NR
3 Visits	9.7%	7.0%	6.8%	9.8%	11.7%	14.1%	8.1%	NR
4 Visits	14.8%	12.7%	9.6%	15.8%	15.1%	22.6%	15.7%	NR
5 Visits	21.0%	16.9%	15.1%	23.2%	21.7%	20.7%	21.4%	NR
6 + Visits	36.8%	42.6%	57.6%	30.4%	35.0%	22.4%	44.4%	NR
<b>Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life</b>	54.5%	48.1%	60.0%	51.9%	64.7%	69.1%	62.5%	NR
<b>Adolescent Well-Care Visits</b>	35.0%	23.4%	33.1%	31.3%	36.0%	36.7%	37.5%	39.4%



**Table 2-9 Adult Medicaid Survey Results**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor	Statewide Average	2005 National Average
<b>Getting Needed Care</b>										
Not a Problem	76.8%	72.7%	73.3%	72.8%	81.4%	NA	73.7%	77.0%	75.4%	66.0%
<b>Customer Service</b>										
Not a Problem	66.1%	NA	52.0%	67.6%	NA	NA	NA	NA	61.9%	70.0%
<b>Getting Care Quickly</b>										
Always + Usually	74.8%	69.8%	70.8%	71.7%	73.3%	NA	69.6%	69.4%	71.3%	72.0%
<b>How Well Doctors Communicate</b>										
Always + Usually	85.7%	85.3%	83.3%	83.6%	91.8%	88.5%	84.7%	87.4%	86.3%	86.0%
<b>Courteous and Helpful Office Staff</b>										
Always + Usually	90.5%	88.4%	87.2%	89.1%	93.7%	87.7%	88.5%	88.5%	89.2%	88.0%
<b>Rating of Personal Doctor or Nurse</b>										
9+10	60.2%	59.9%	56.0%	55.6%	67.0%	66.0%	52.2%	66.3%	60.4%	59.0%
<b>Rating of Specialist Seen Most Often</b>										
9+10	67.0%	62.6%	65.5%	62.5%	71.2%	NA	55.1%	62.3%	63.7%	59.0%
<b>Rating of All Health Care</b>										
9+10	56.4%	54.0%	49.1%	50.2%	62.4%	65.0%	48.3%	55.6%	55.1%	54.0%
<b>Rating of Health Plan</b>										
9+10	55.5%	58.9%	53.3%	51.0%	62.0%	56.4%	47.5%	51.4%	54.5%	51.0%





**Table 2-10 Child General Population**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor	Statewide Average	2005 National Average
<b>Getting Needed Care</b>										
Not a Problem	81.0%	82.1%	83.6%	84.2%	84.0%	NA	82.0%	*	82.8%	71.0%
<b>Customer Service</b>										
Not a Problem	NA	NA	72.3%	NA	NA	NA	NA	*	72.3%	75.0%
<b>Getting Care Quickly</b>										
Always + Usually	78.6%	79.3%	82.2%	80.8%	75.1%	NA	74.7%	*	78.5%	79.0%
<b>How Well Doctors Communicate</b>										
Always + Usually	90.4%	92.2%	91.6%	91.5%	89.6%	NA	90.9%	*	91.0%	90.0%
<b>Courteous and Helpful Office Staff</b>										
Always + Usually	93.2%	91.6%	92.2%	93.7%	90.0%	NA	89.5%	*	91.7%	91.0%
<b>Rating of Personal Doctor or Nurse</b>										
9+10	64.6%	65.5%	65.3%	66.9%	62.3%	66.4%	52.8%	*	63.4%	64.0%
<b>Rating of Specialist Seen Most Often</b>										
9+10	NA	NA	69.6%	62.5%	NA	NA	NA	*	66.1%	61.0%
<b>Rating of All Health Care</b>										
9+10	64.7%	67.3%	68.1%	69.0%	65.4%	NA	63.1%	*	66.3%	65.0%
<b>Rating of Health Plan</b>										
9+10	64.9%	67.1%	68.0%	67.5%	63.8%	56.1%	59.6%	*	63.9%	60.0%

\*Windsor did not conduct Child CAHPS 3.0H General Population.

**Table 2-11 Children with Chronic Conditions**

	BlueCare	JDH	PHP	TCS	TLC	UAHC	Unison	Windsor	Statewide Average*
<b>Getting Needed Care</b>									
Not a Problem	79.5%	78.8%	80.3%	81.5%	81.5%	NA	81.7%	NA	80.6%
<b>Customer Service</b>									
Not a Problem	NA	NA	68.7%	NA	NA	NA	NA	NA	68.7%
<b>Getting Care Quickly</b>									
Always + Usually	77.9%	77.8%	78.5%	80.9%	75.0%	72.6%	76.3%	NA	77.0%
<b>How Well Doctors Communicate</b>									
Always + Usually	89.8%	90.2%	89.6%	91.6%	91.6%	85.6%	90.3%	91.0%	90.0%
<b>Courteous and Helpful Office Staff</b>									
Always + Usually	91.6%	90.4%	90.5%	92.8%	91.5%	84.9%	90.7%	90.2%	90.3%
<b>Rating of Personal Doctor or Nurse</b>									
9+10	63.4%	64.2%	64.8%	66.6%	69.0%	63.6%	61.8%	68.4%	65.2%
<b>Rating of Specialist Seen Most Often</b>									
9+10	64.3%	65.1%	67.3%	70.4%	68.4%	NA	69.5%	NA	67.5%
<b>Rating of All Health Care</b>									
9+10	62.4%	66.3%	64.5%	69.3%	69.9%	59.4%	65.3%	67.8%	65.6%
<b>Rating of Health Plan</b>									
9+10	60.7%	63.1%	61.6%	65.1%	64.3%	51.5%	63.6%	62.8%	61.6%

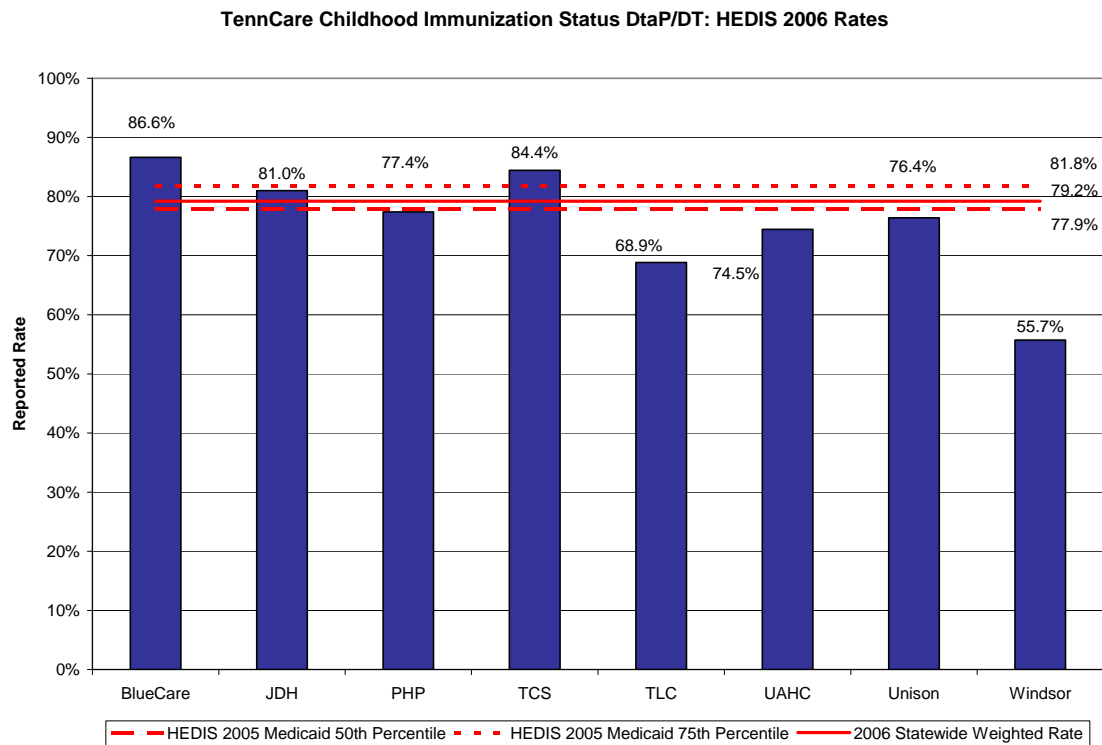
\*The statewide average is utilized for comparison purposes as national data are not available for the Children with Chronic Conditions Survey.



## Plan Performance Graphs

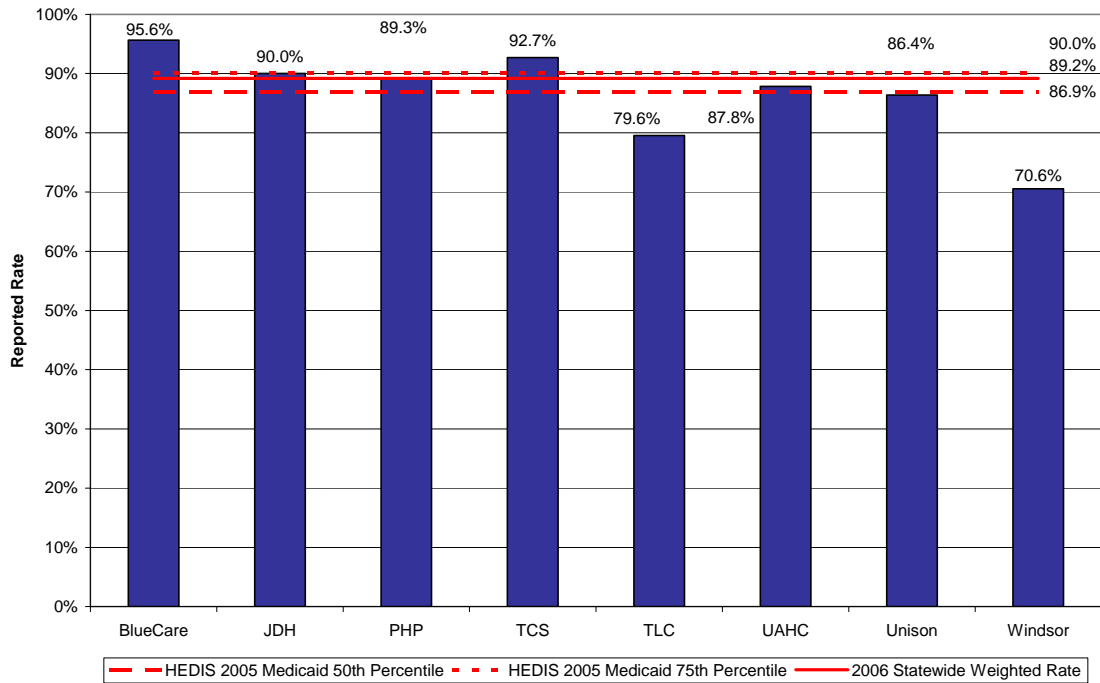
The following graphs display the plan specific performance rates for selected measures required by Medicaid MCOs seeking NCQA accreditation. In each Figure, the Medicaid HEDIS 2005 75<sup>th</sup> percentile is indicated by a red-dotted line (.....), the Medicaid HEDIS 50<sup>th</sup> percentile is indicated by a red-dashed line (-----) and the Tennessee statewide average is indicated by a solid red line (———). These are provided for comparison purposes. It is important to note that the Medicaid HEDIS 50<sup>th</sup> and 75<sup>th</sup> percentile data points are not benchmarks however are utilized during the HEDIS Compliance Audit for evaluation purposes.

### Effectiveness of Care

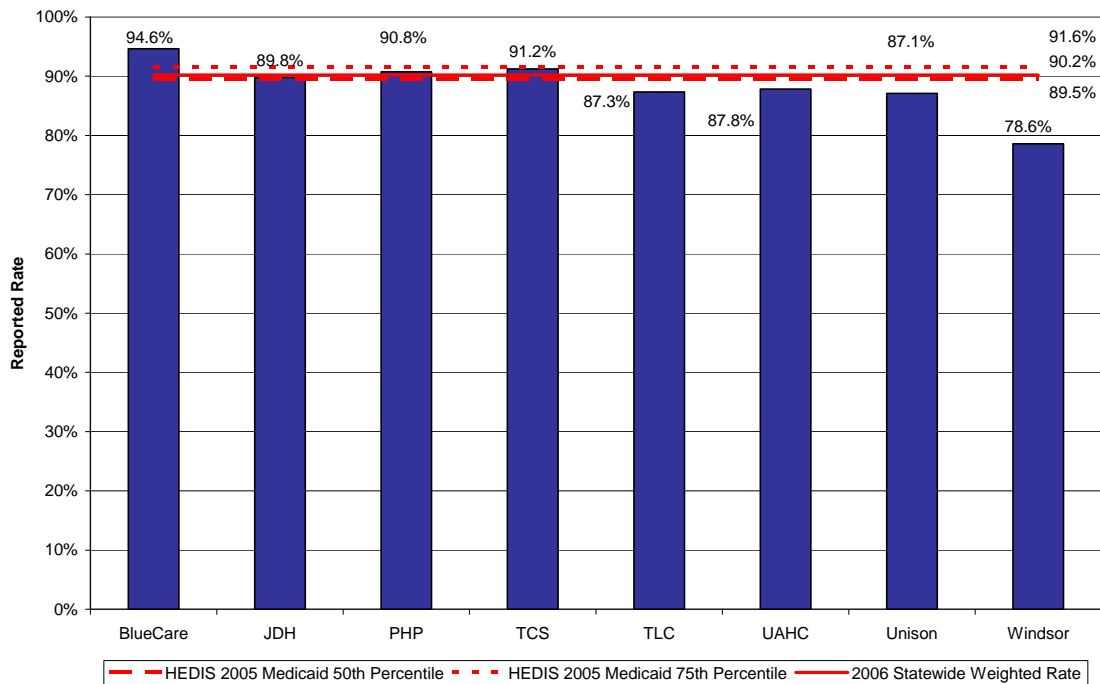




### TennCare Childhood Immunization Status IPV: HEDIS 2006 Rates

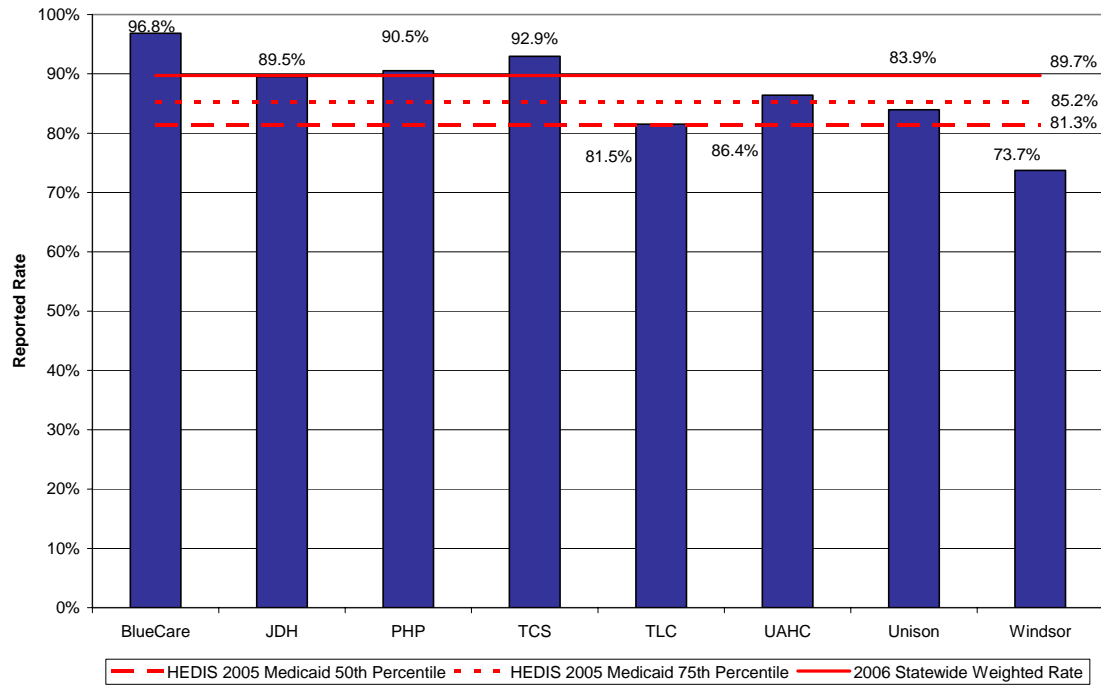


### TennCare Childhood Immunization Status MMR: HEDIS 2006 Rates

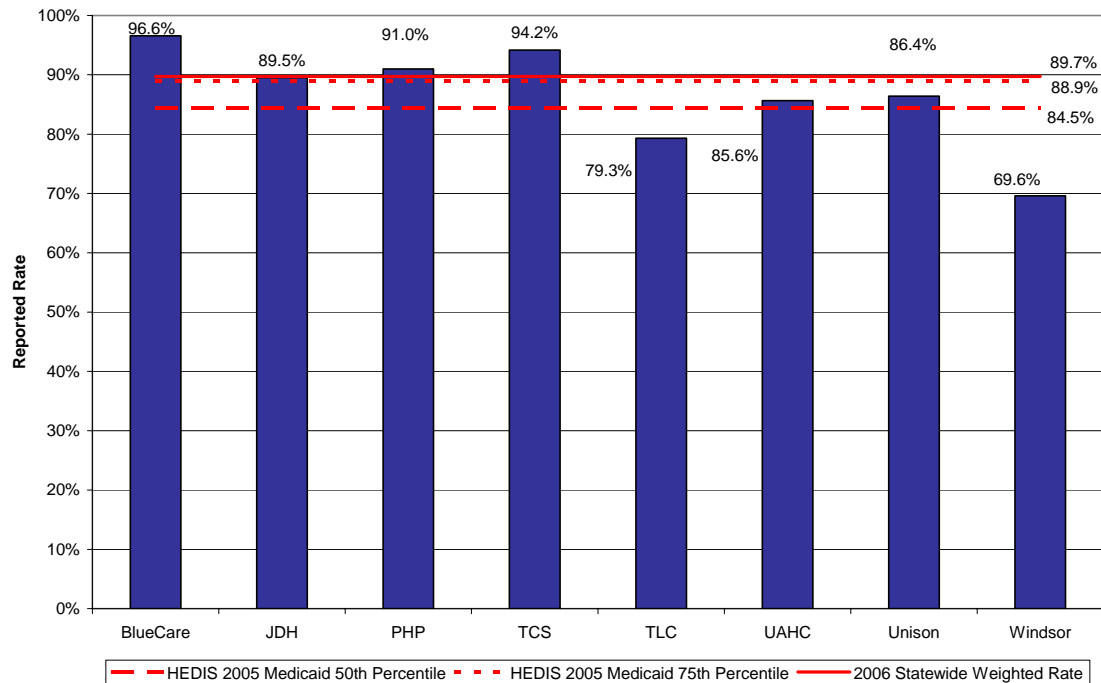




### TennCare Childhood Immunization Status HIB: HEDIS 2006 Rates

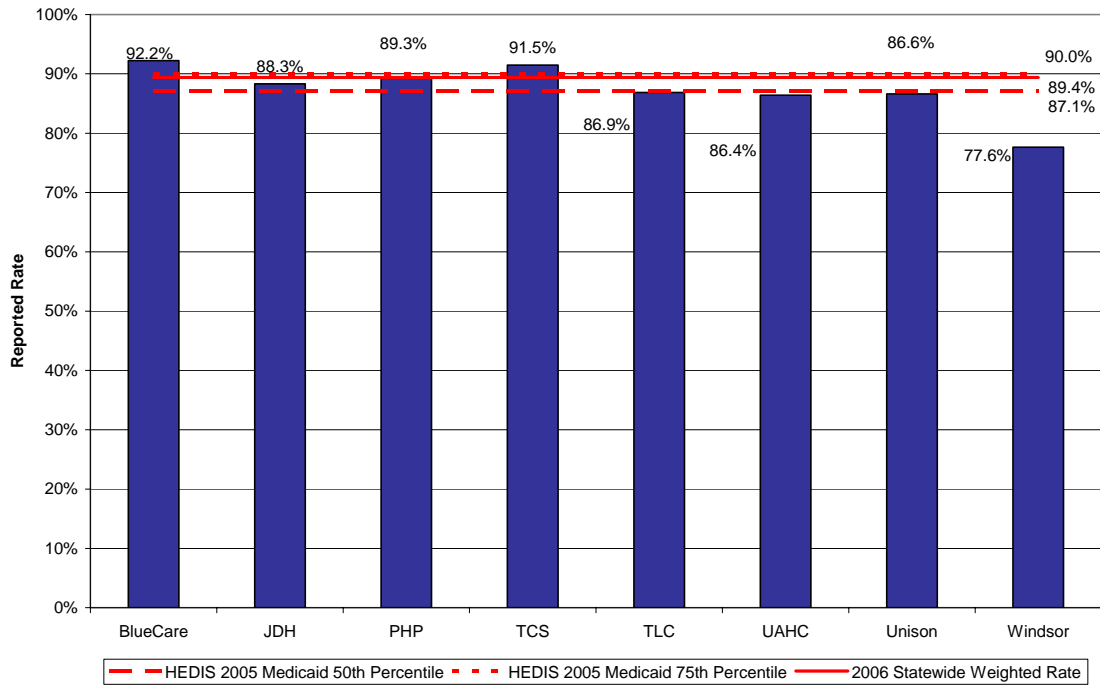


### TennCare Childhood Immunization Status Hepatitis B: HEDIS 2006 Rates

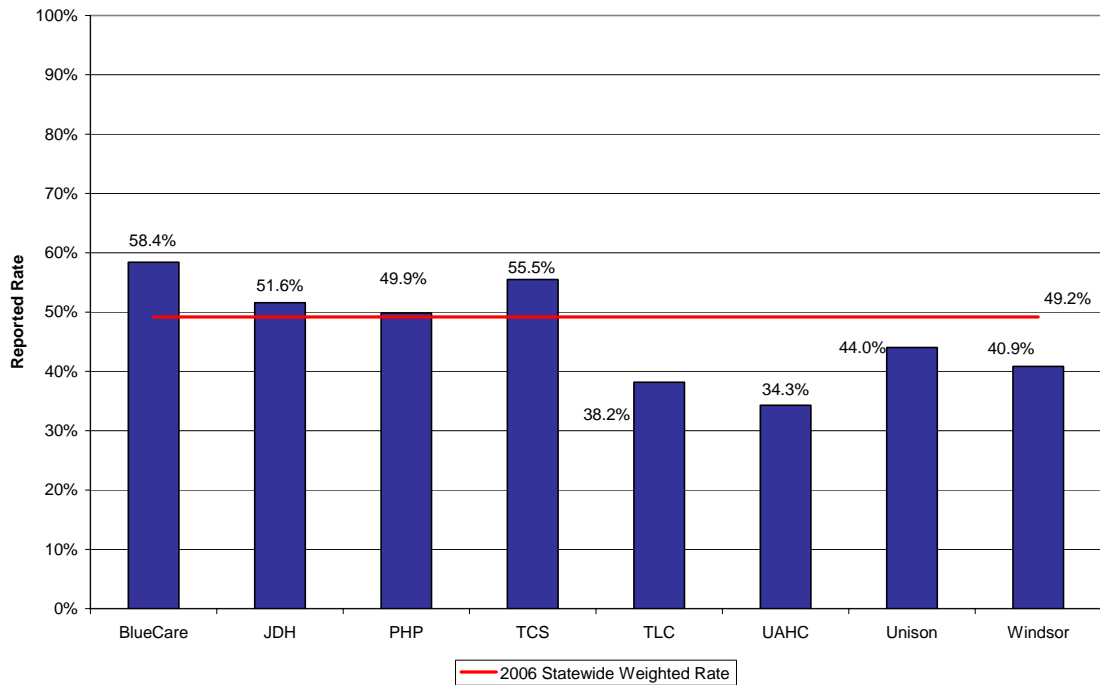




### TennCare Childhood Immunization Status VZV: HEDIS 2006 Rates



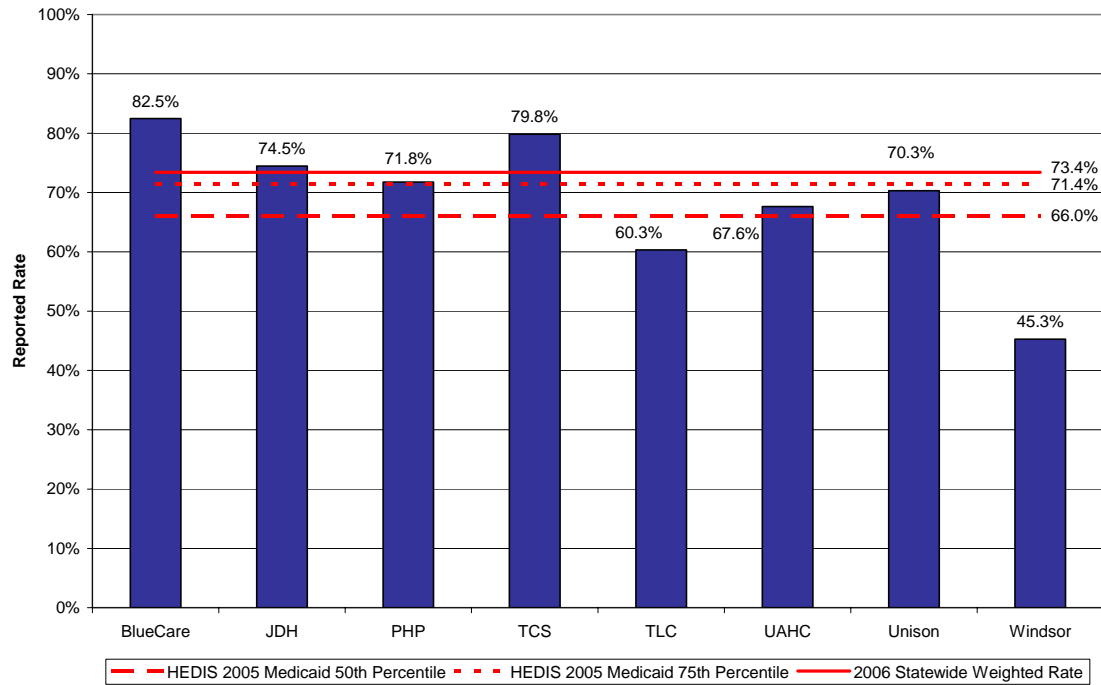
### TennCare Childhood Immunization Status Pneumococcal Conjugate: HEDIS 2006 Rates



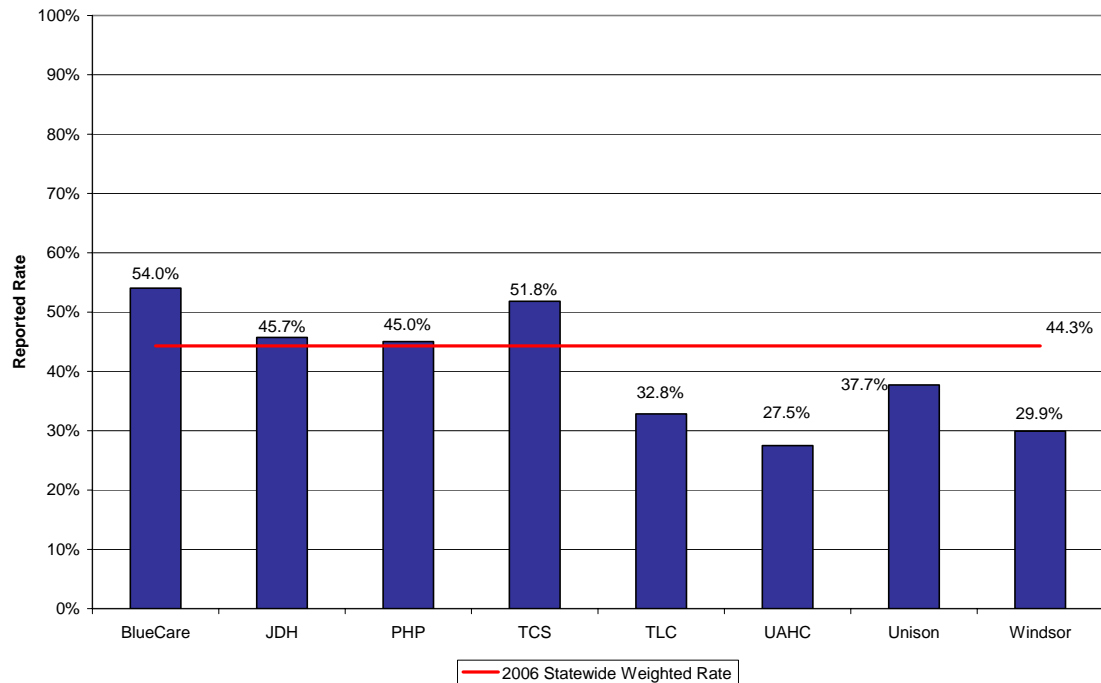
(No comparison data available.)



**TennCare Childhood Immunization Status Combo 2: HEDIS 2006 Rates**



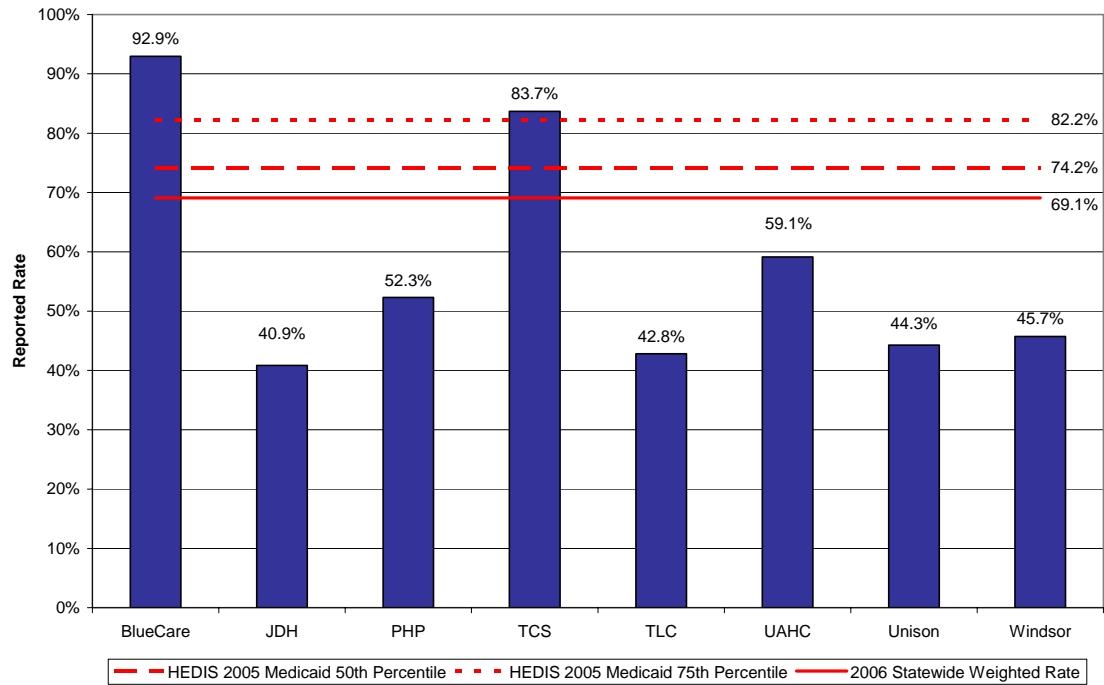
**TennCare Childhood Immunization Status Combo 3: HEDIS 2006 Rates**



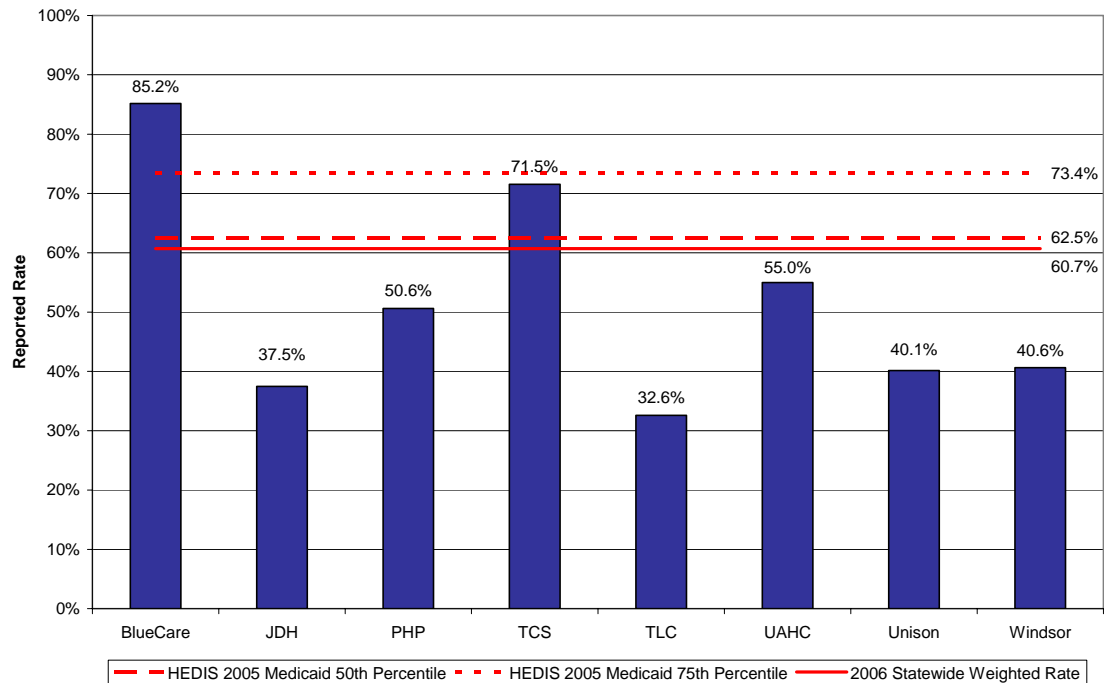
(No comparison data available.)



### TennCare Adolescent Immunization Status MMR: HEDIS 2006 Rates

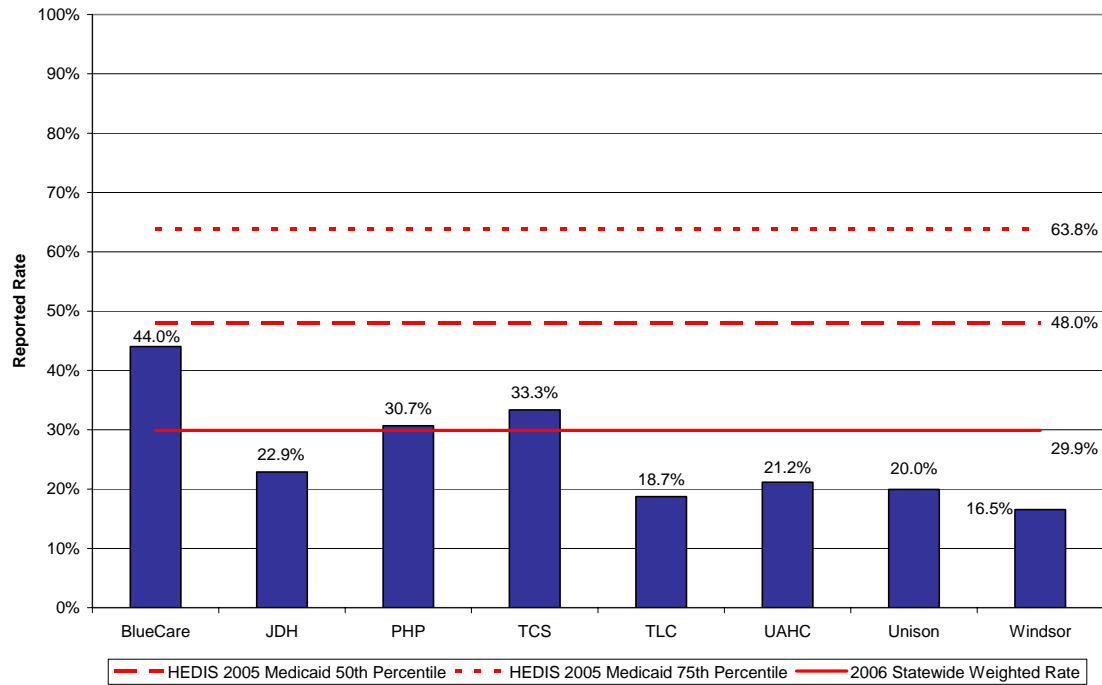


### TennCare Adolescent Immunization Status Hepatitis B: HEDIS 2006 Rates

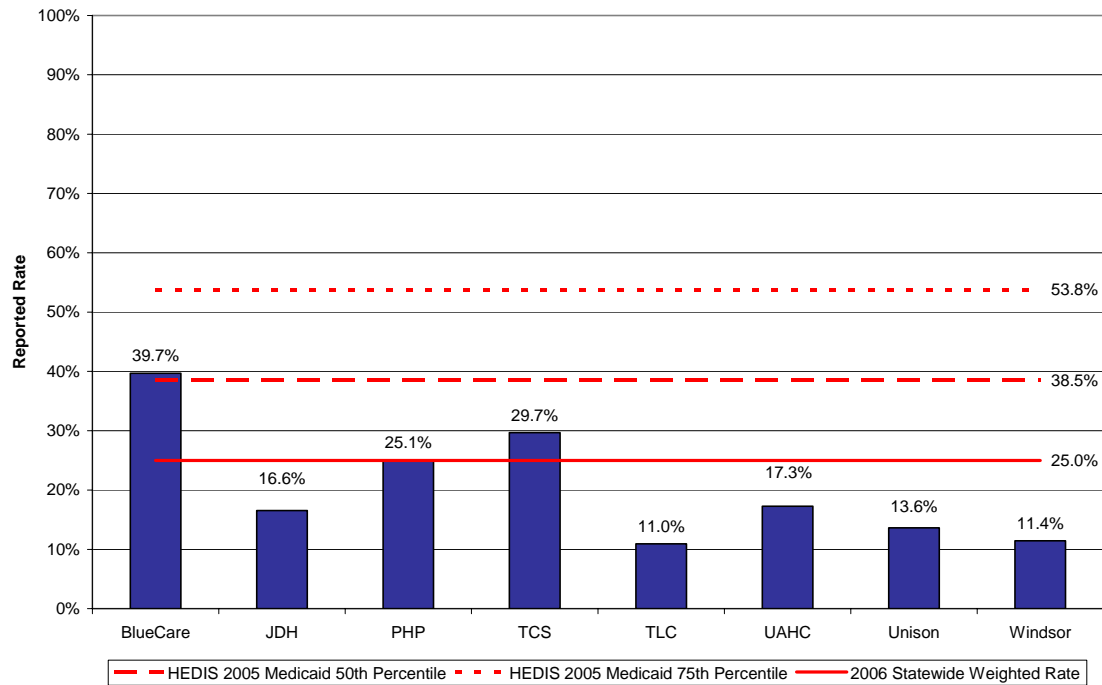




### TennCare Adolescent Immunization Status VZV: HEDIS 2006 Rates



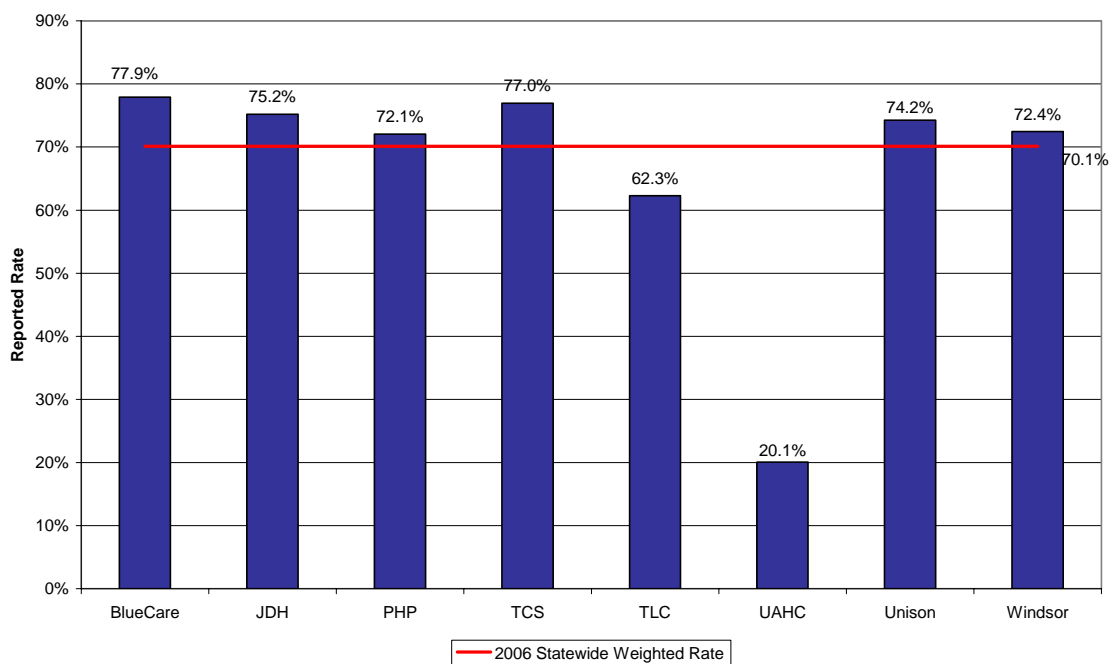
### TennCare Adolescent Immunization Status Combo 2: HEDIS 2006 Rates





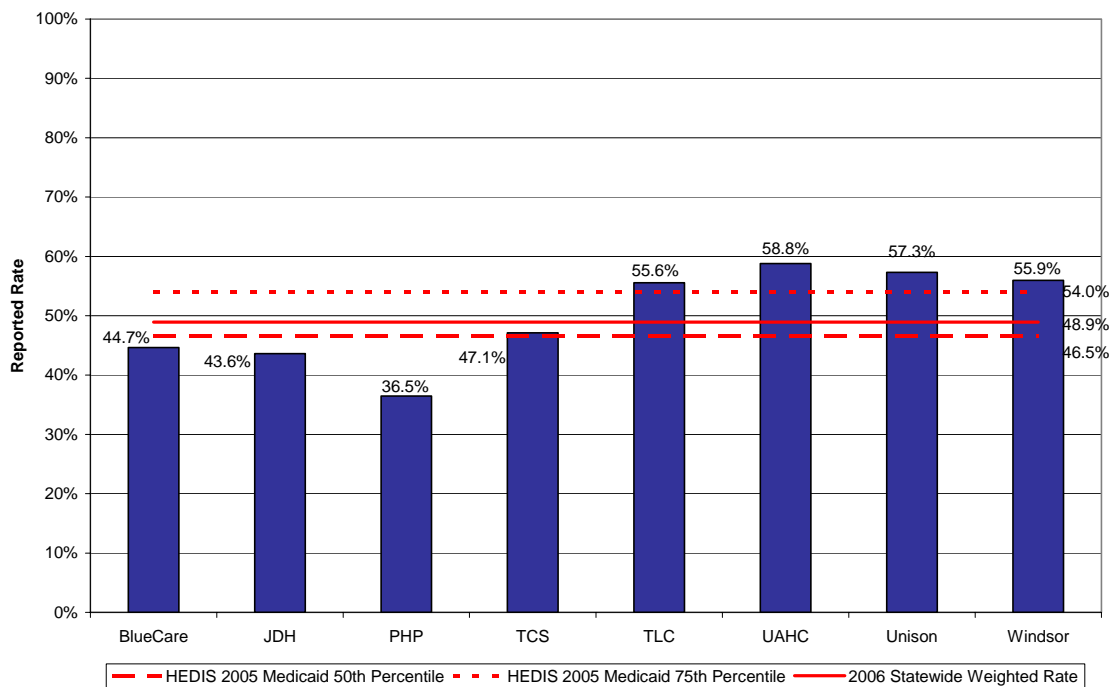


### TennCare Inappropriate Antibiotic Treatment for Adults with Acute Bronchitis: HEDIS 2006 Rates



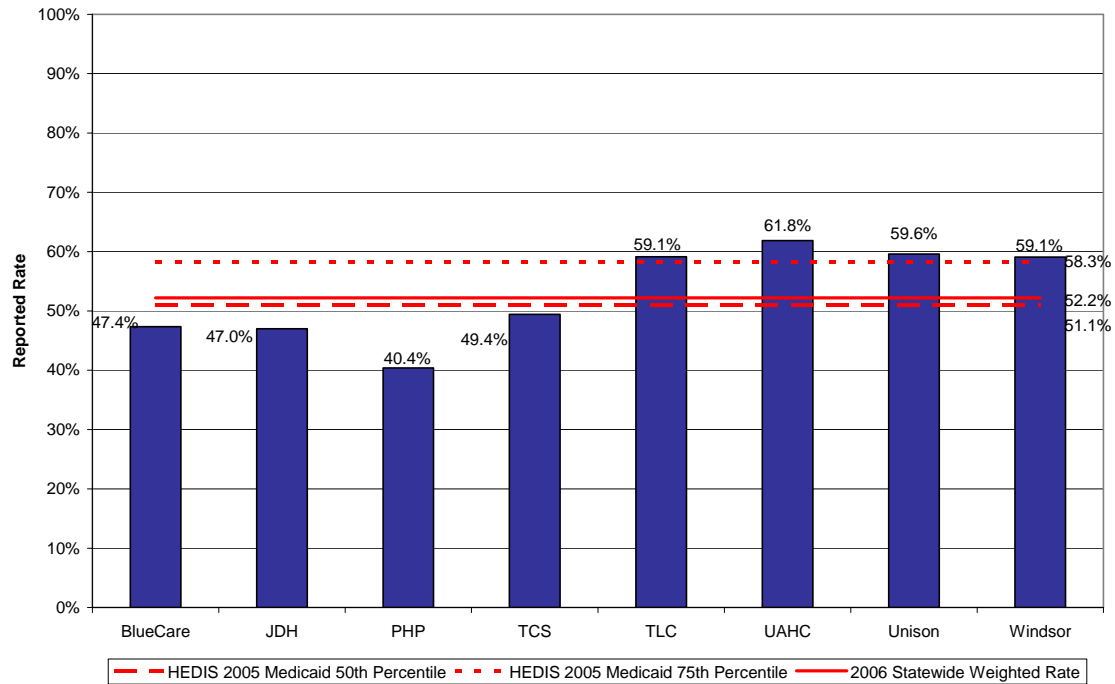
(No comparison data available.)

### TennCare Chlamydia Screening in Women 16-20 Year Olds: HEDIS 2006 Rates

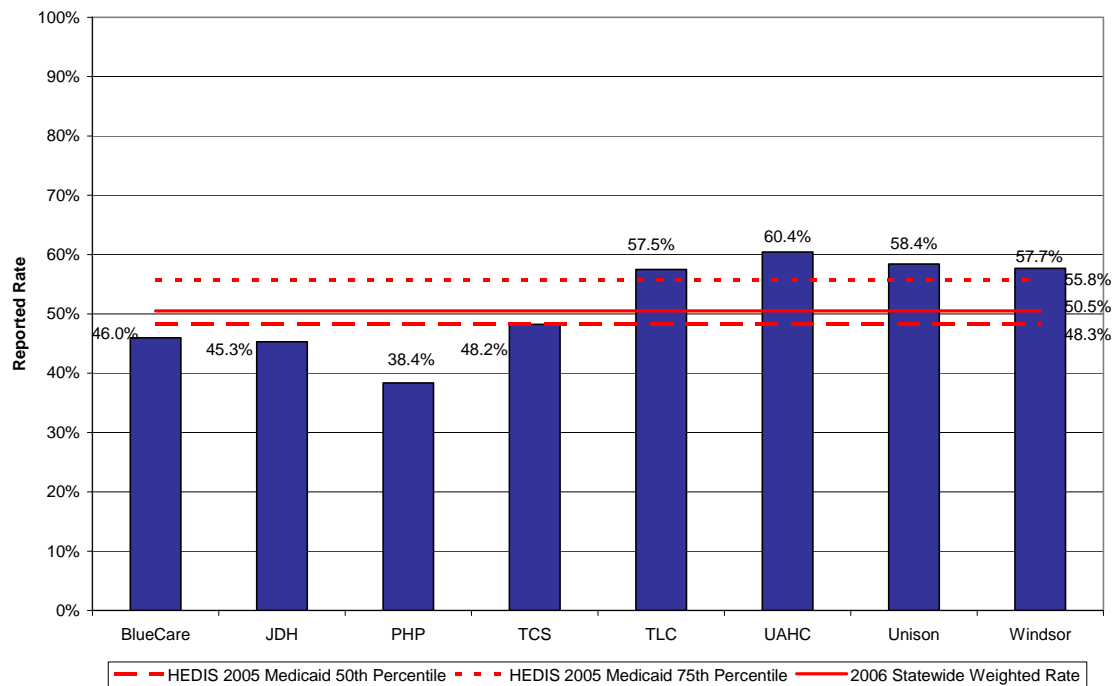




### TennCare Chlamydia Screening in Women 21-25 Year Olds: HEDIS 2006 Rates

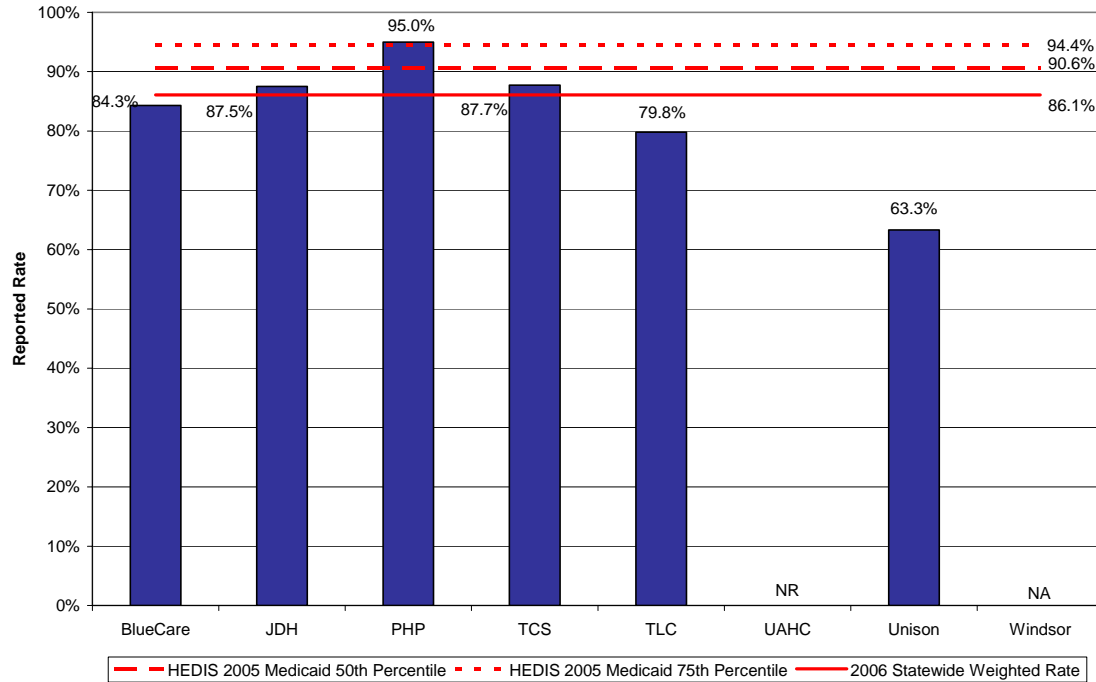


### TennCare Chlamydia Screening in Women Total: HEDIS 2006 Rates

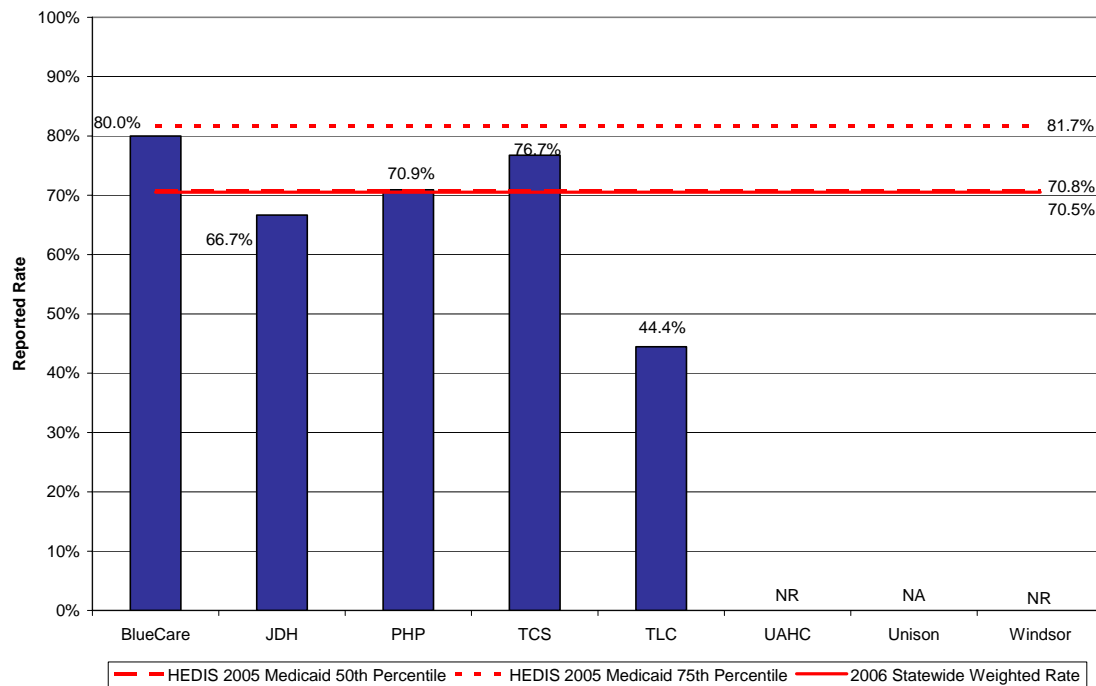




### TennCare Beta-Blocker Treatment After a Heart Attack: HEDIS 2006 Rates

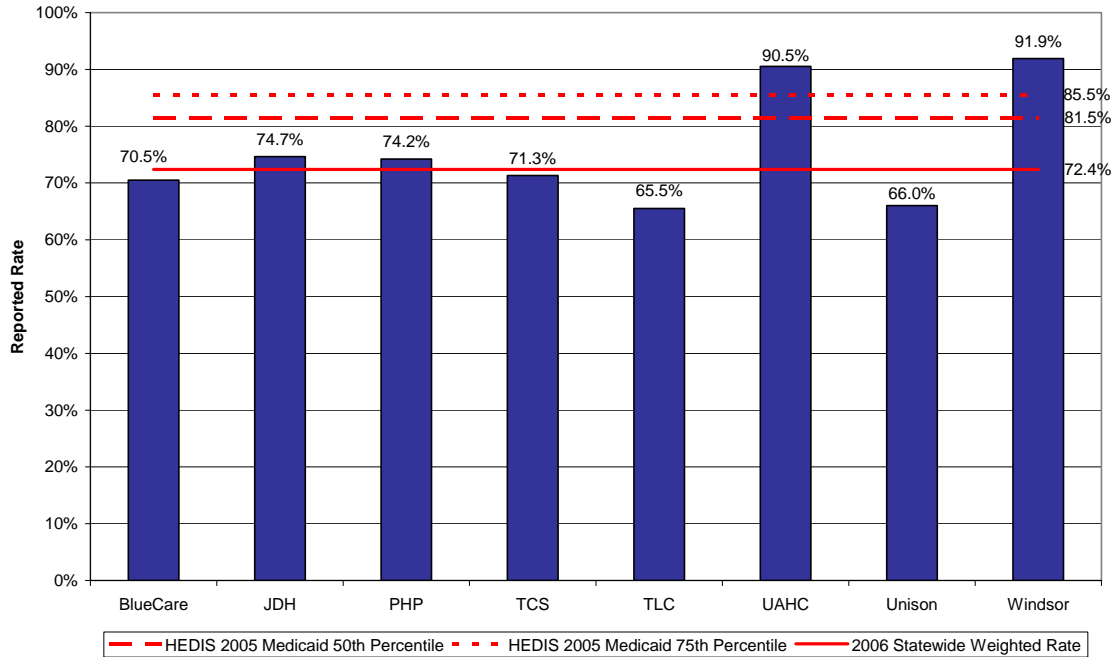


### TennCare Persistence of Beta-Blocker Treatment After a Heart Attack: HEDIS 2006 Rates

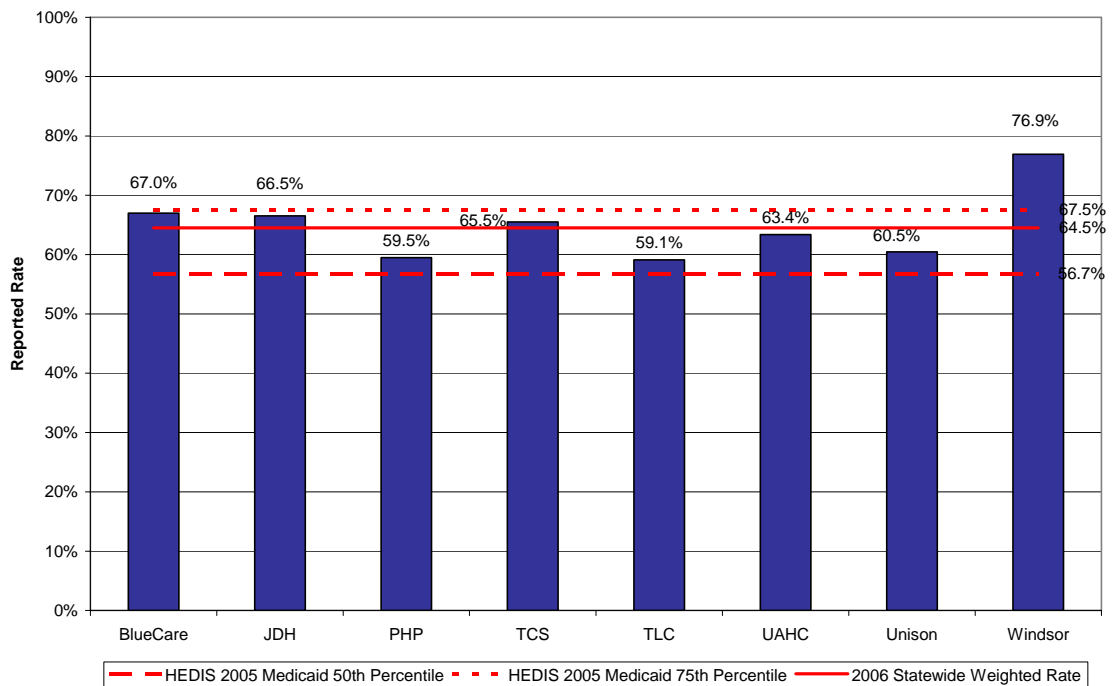




### TennCare Appropriate Treatment for Children with Upper Respiratory Infection: HEDIS 2006 Rates

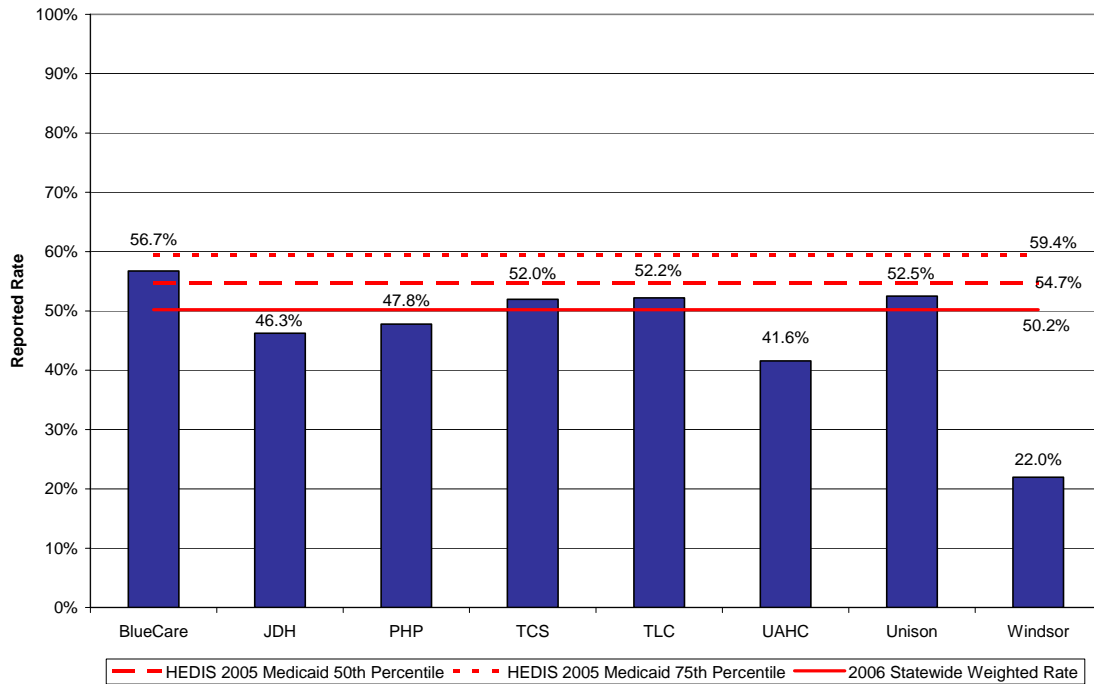


### TennCare Appropriate Testing for Children with Pharyngitis: HEDIS 2006 Rates

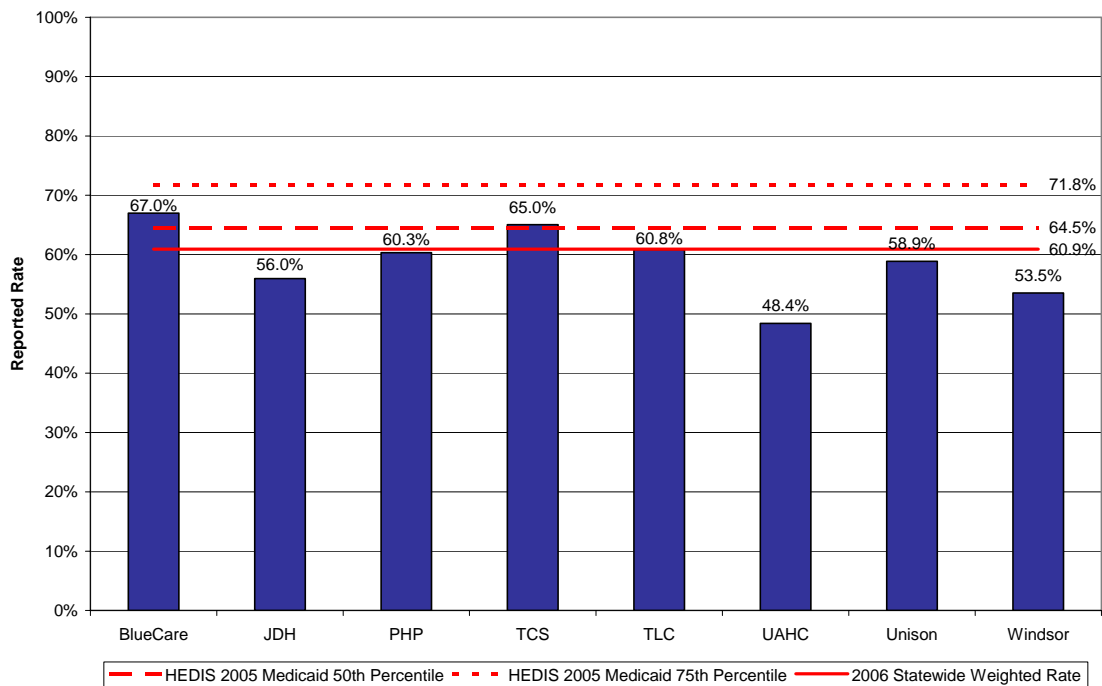




### TennCare Breast Cancer Screening: HEDIS 2006 Rates

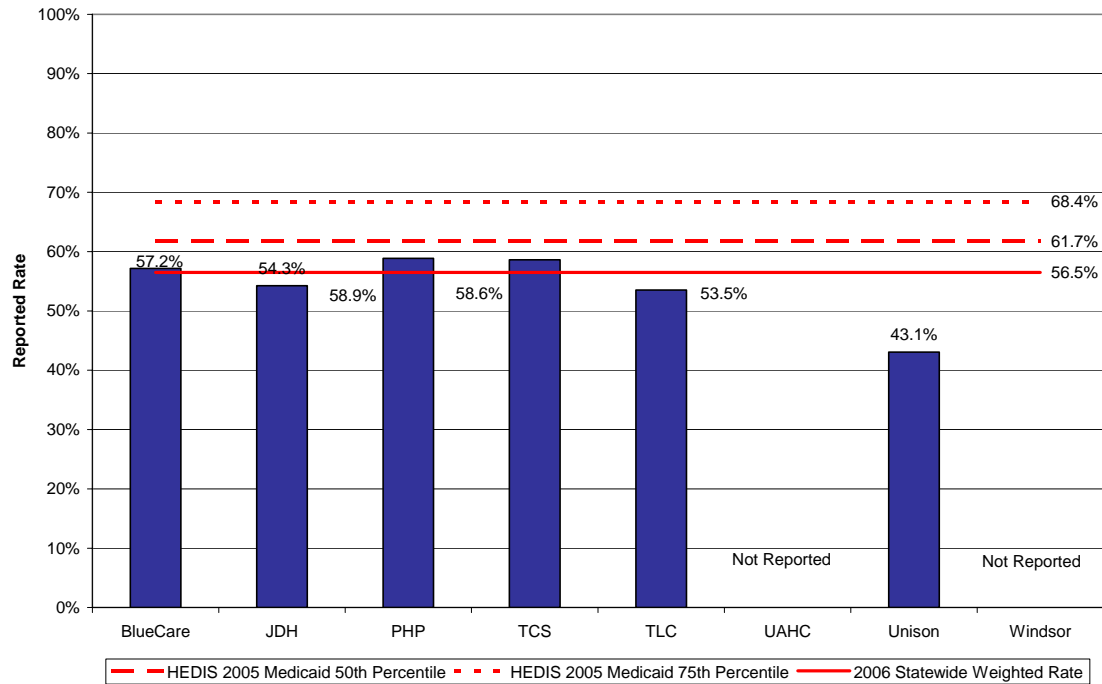


### TennCare Cervical Cancer Screening: HEDIS 2006 Rates

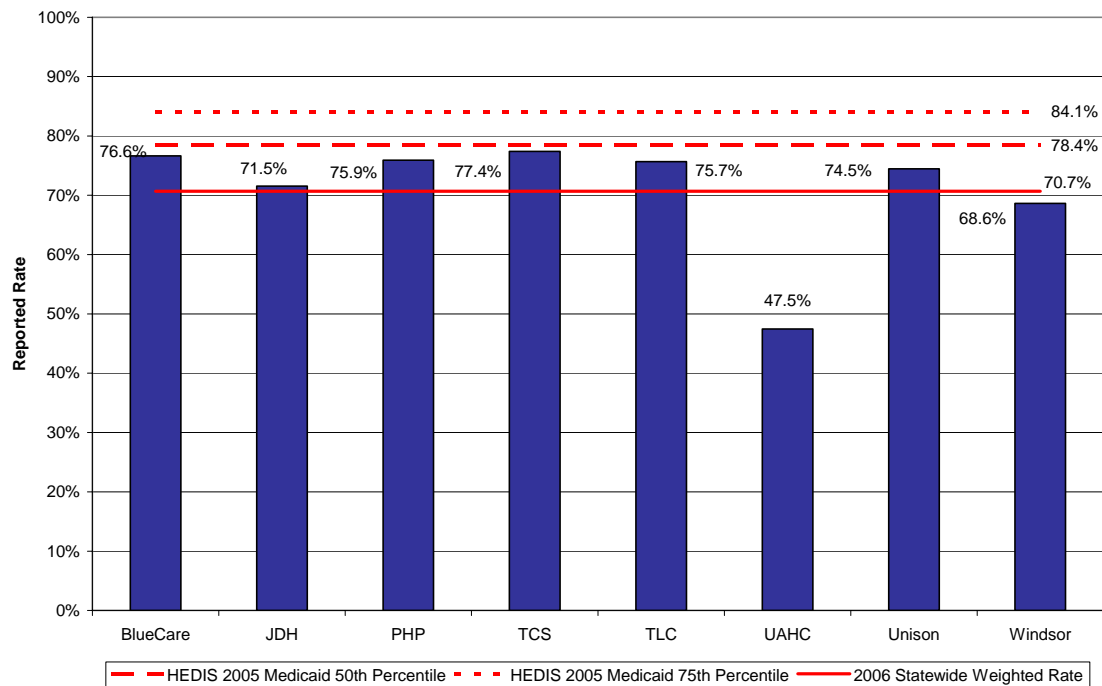




### TennCare Controlling High Blood Pressure: HEDIS 2006 Rates

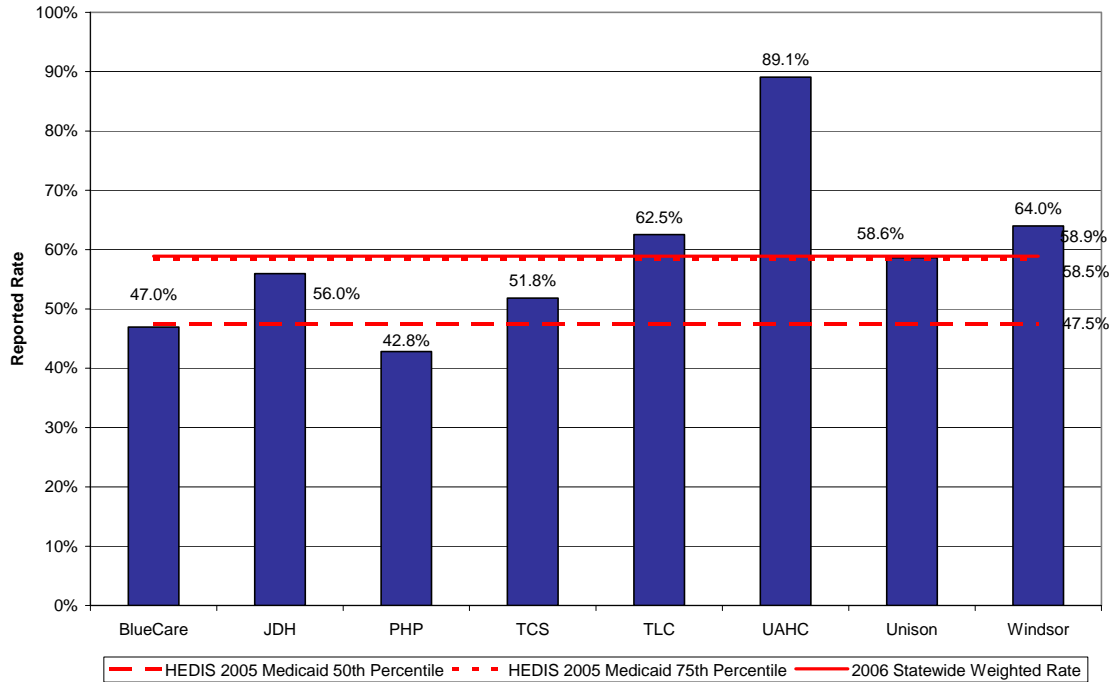


### TennCare Comprehensive Diabetes Care - HbA1c Testing: HEDIS 2006 Rates

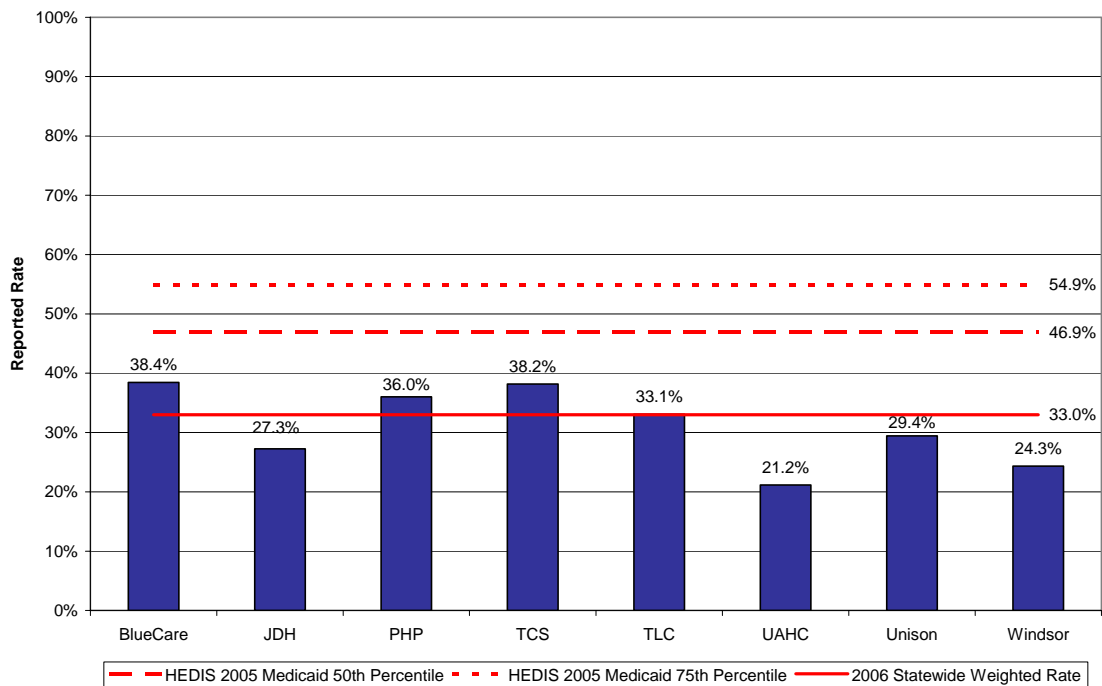




### TennCare Comprehensive Diabetes Care - Poor HbA1c Control\*: HEDIS 2006 Rates

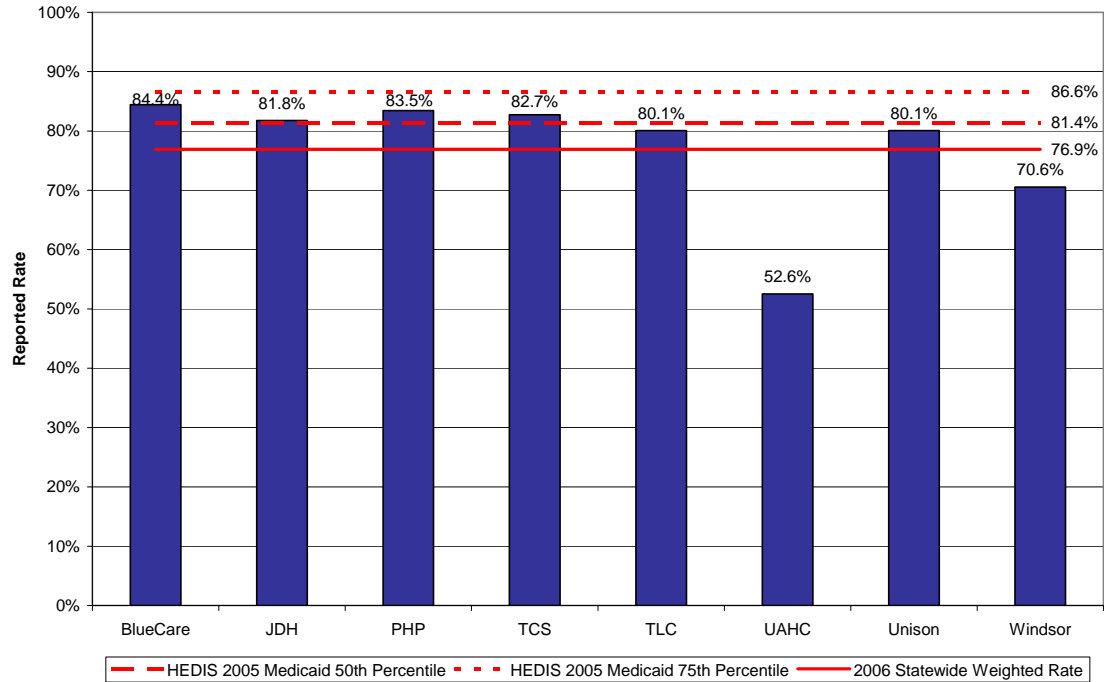


### TennCare Comprehensive Diabetes Care - Eye Exam: HEDIS 2006 Rates

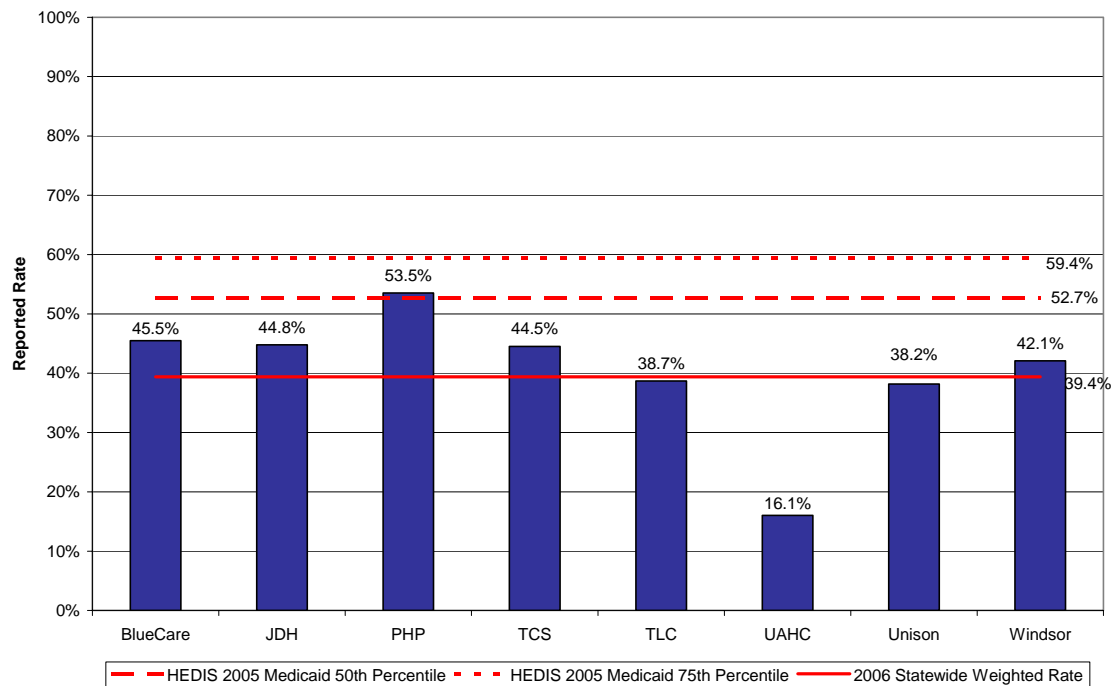




### TennCare Comprehensive Diabetes Care - LDL-C Screening: HEDIS 2006 Rates



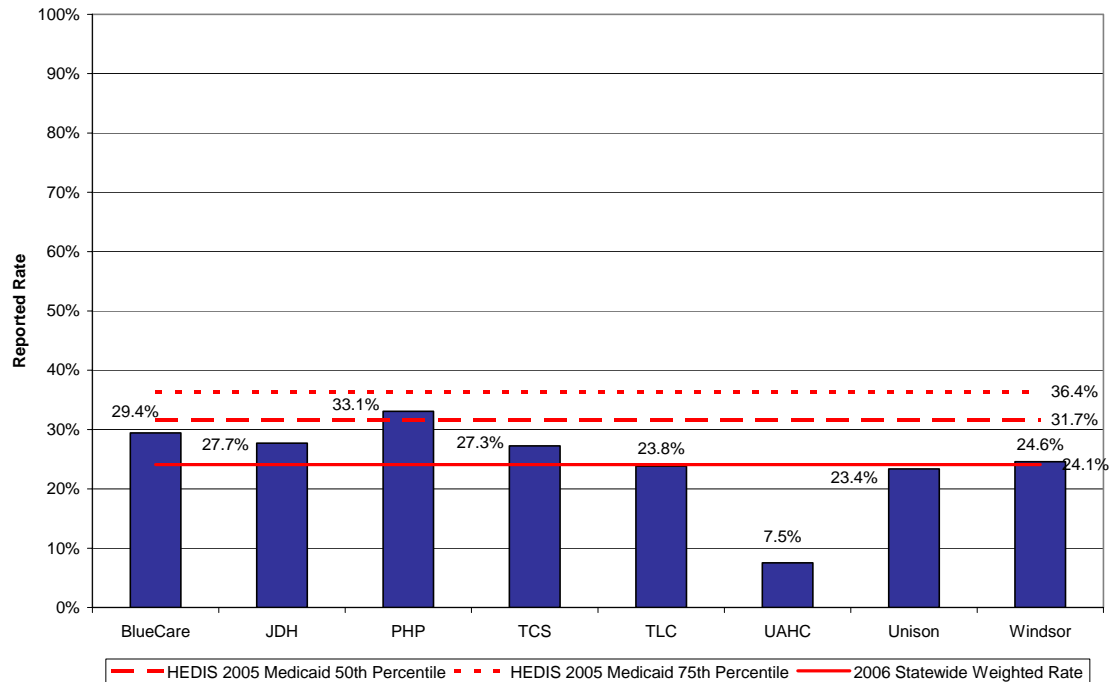
### TennCare Comprehensive Diabetes Care - LDL-C Level <130 mg/dL: HEDIS 2006 Rates



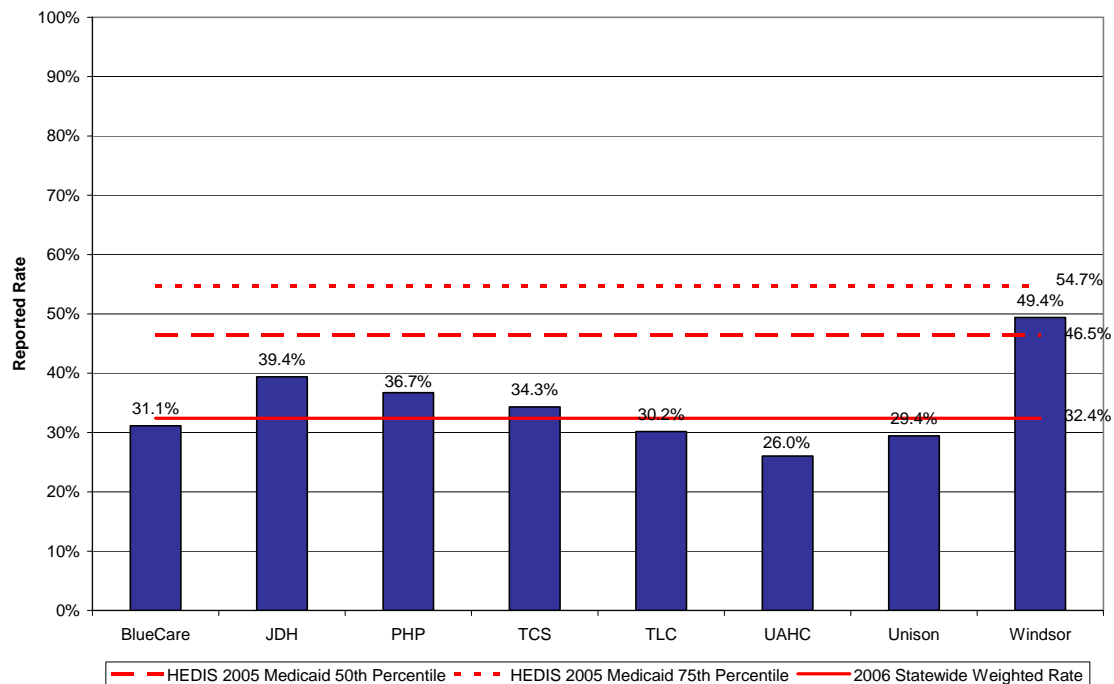




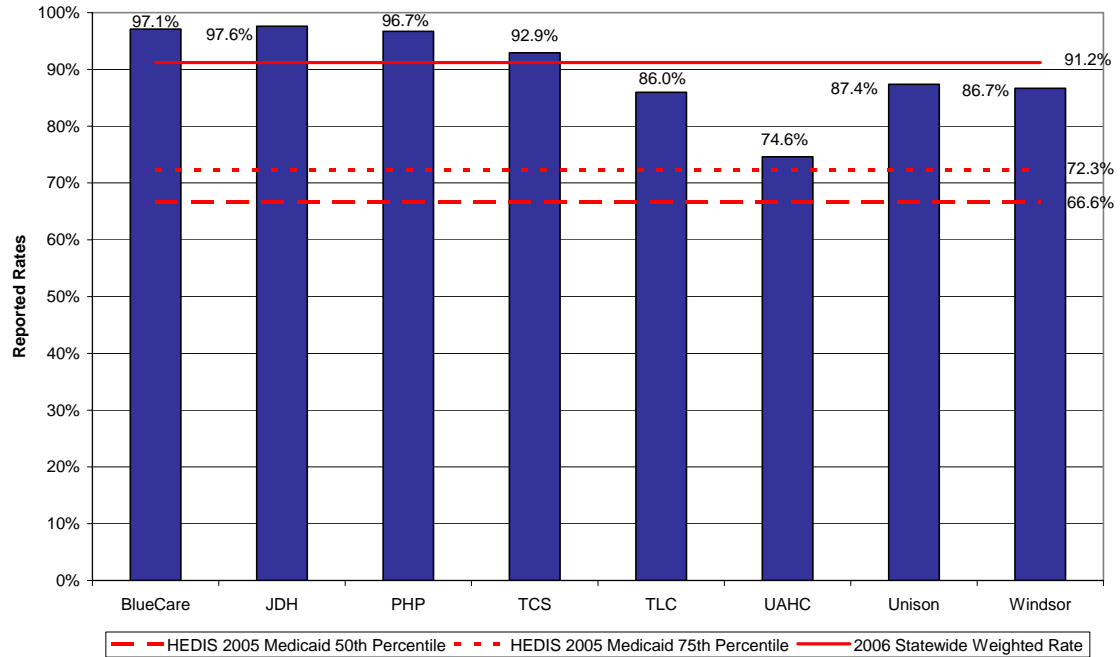
### TennCare Comprehensive Diabetes Care - LDL-C Level <100 mg/dL: HEDIS 2006 Rates



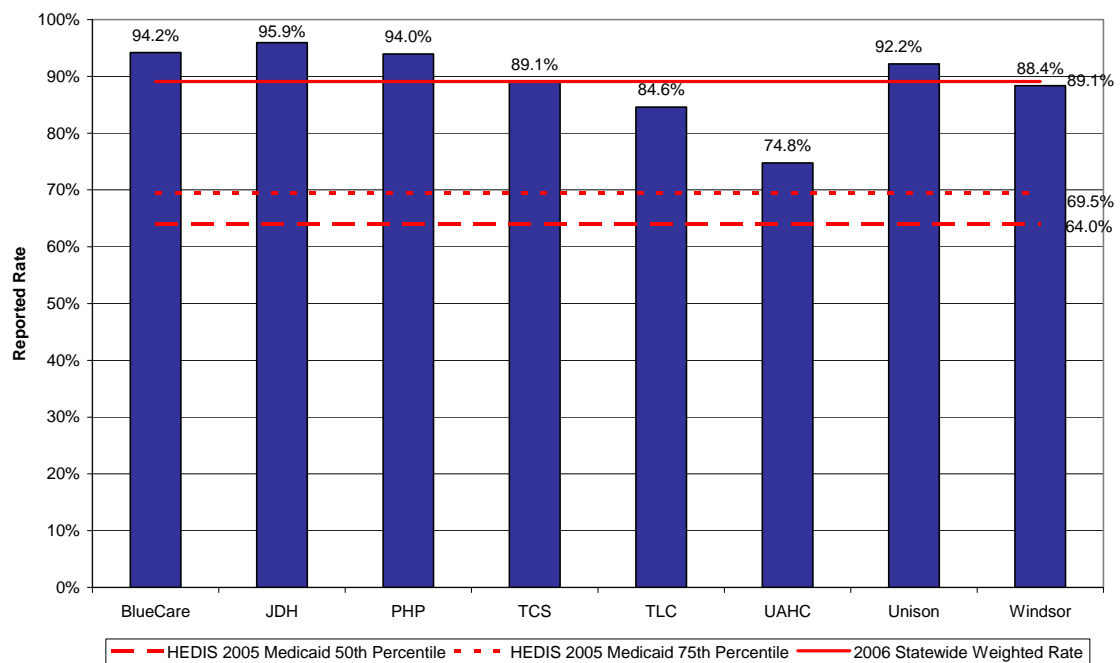
### TennCare Comprehensive Diabetes Care - Monitoring Nephropathy: HEDIS 2006 Rates



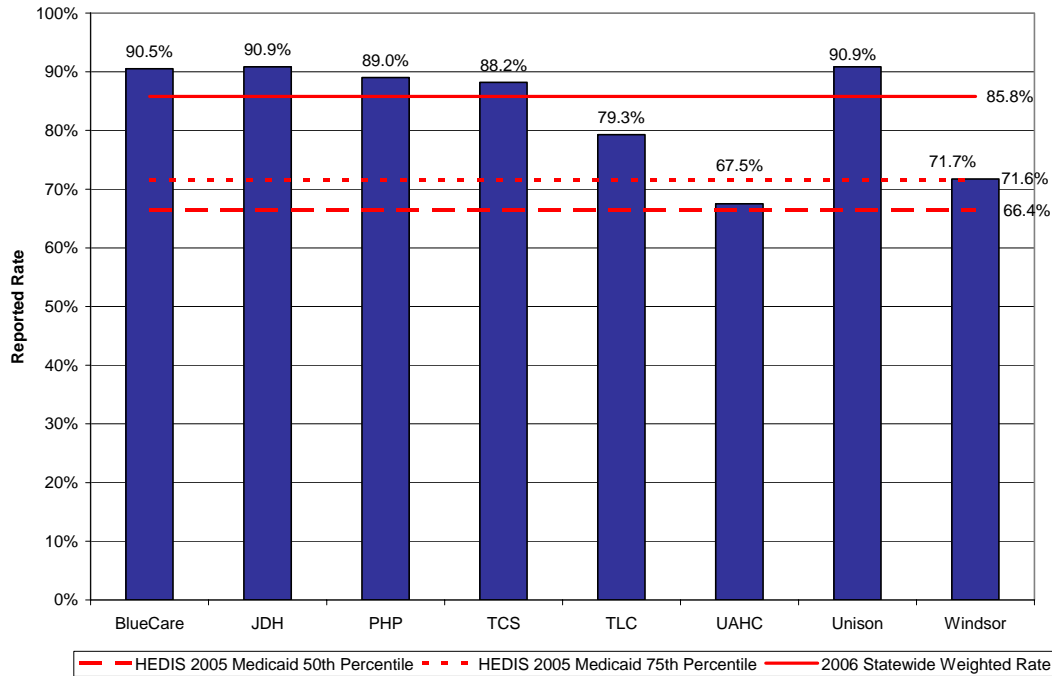
**TennCare Use of Appropriate Medications for People with  
Asthma 5-9 Years: HEDIS 2006 Rates**



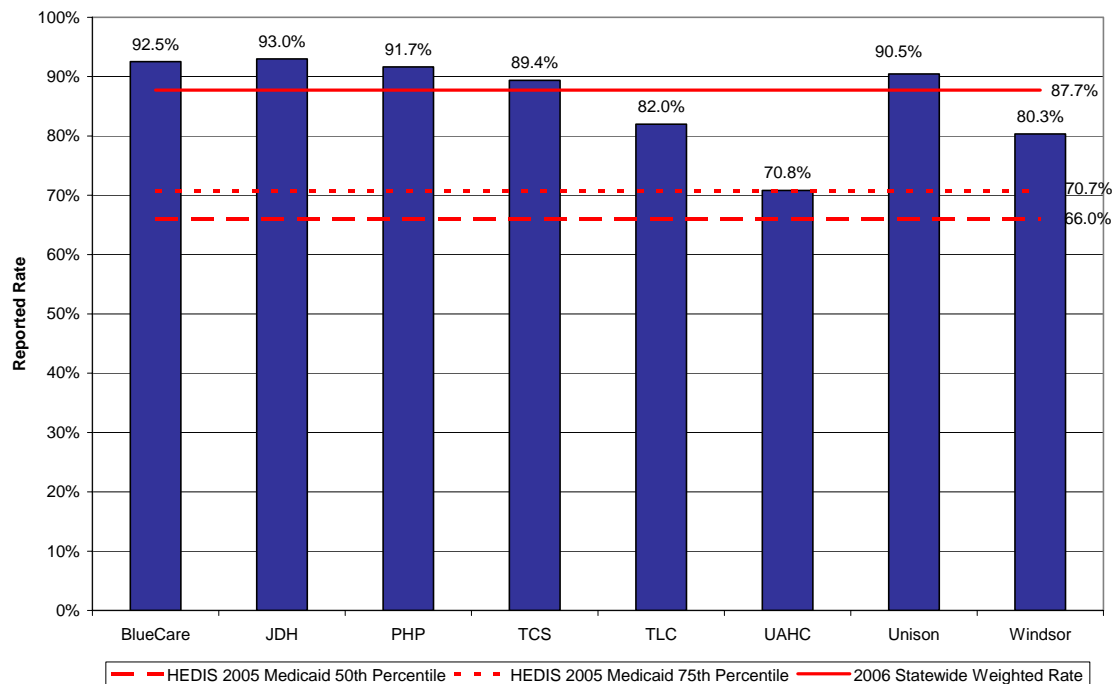
**TennCare Use of Appropriate Medications for People with  
Asthma 10-17 Years: HEDIS 2006 Rates**



**TennCare Use of Appropriate Medications for People with Asthma 18-56: HEDIS 2006 Rates**

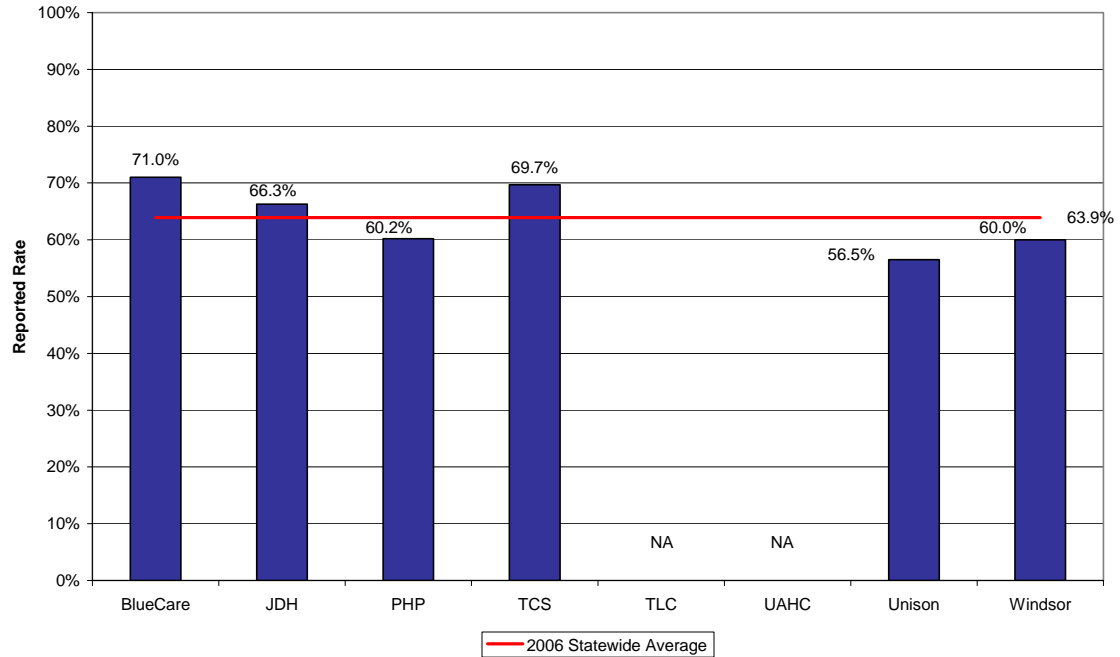


**TennCare Appropriate Medications for People with Asthma: HEDIS 2006 Rates**

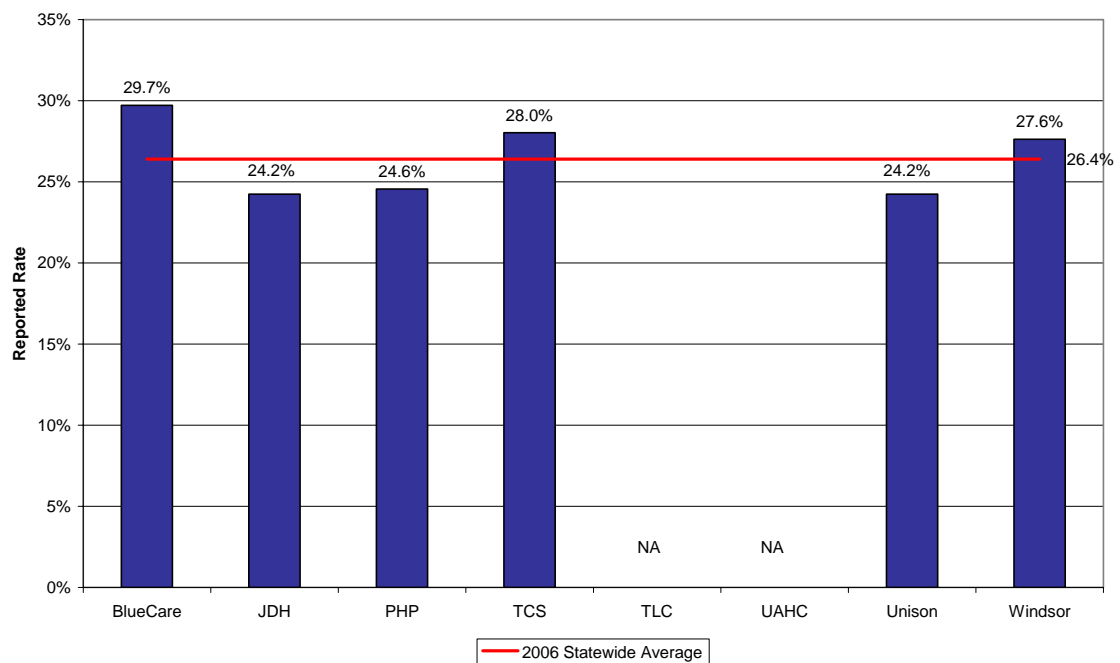




**TennCare Medical Assistance with Smoking Cessation: Advising Smokers to Quit  
NCQA HEDIS 2006 CAHPS 3.0H**

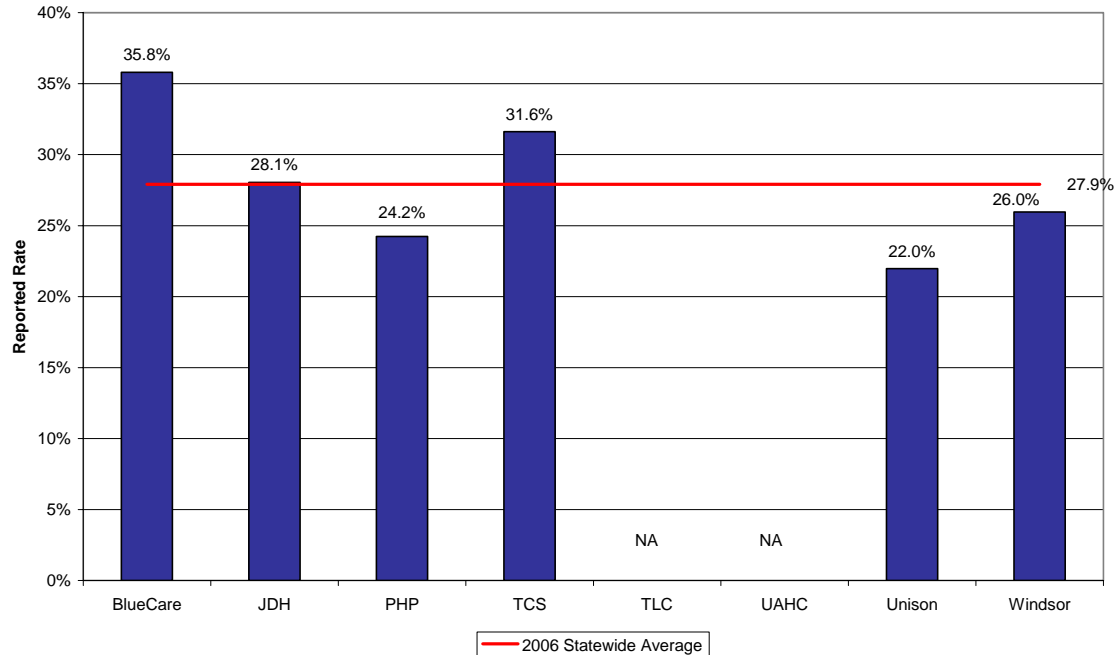


**TennCare Medical Assistance with Smoking Cessation: Discussing Smoking Cessation  
Medications NCQA HEDIS 2006 CAHPS 3.0H**



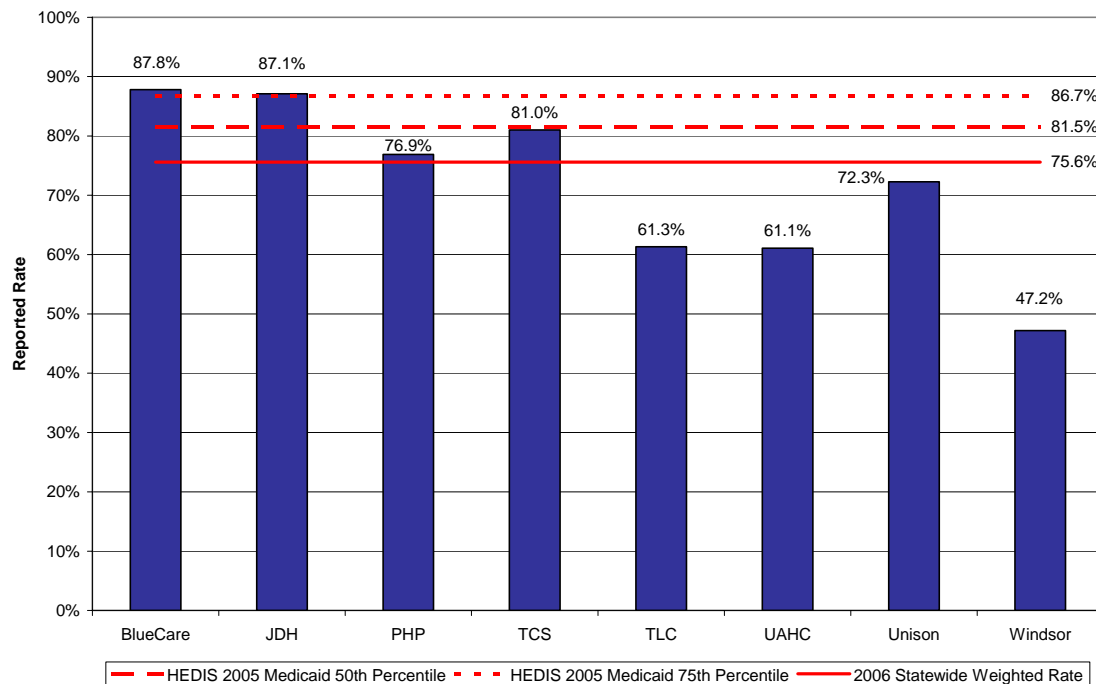


**TennCare Medical Assistance with Smoking Cessation: Discussing Smoking Cessation Strategies NCQA HEDIS 2006 CAHPS 3.0H**



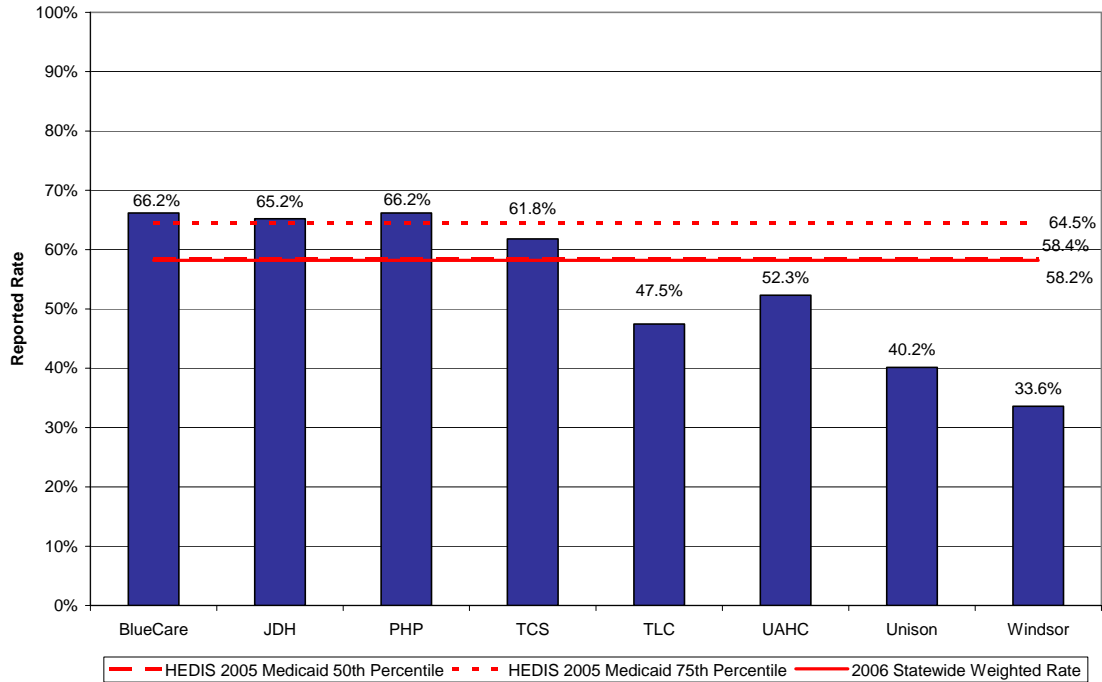
**Access / Availability of Care**

**TennCare Timeliness of Prenatal Care: HEDIS 2006 Rates**

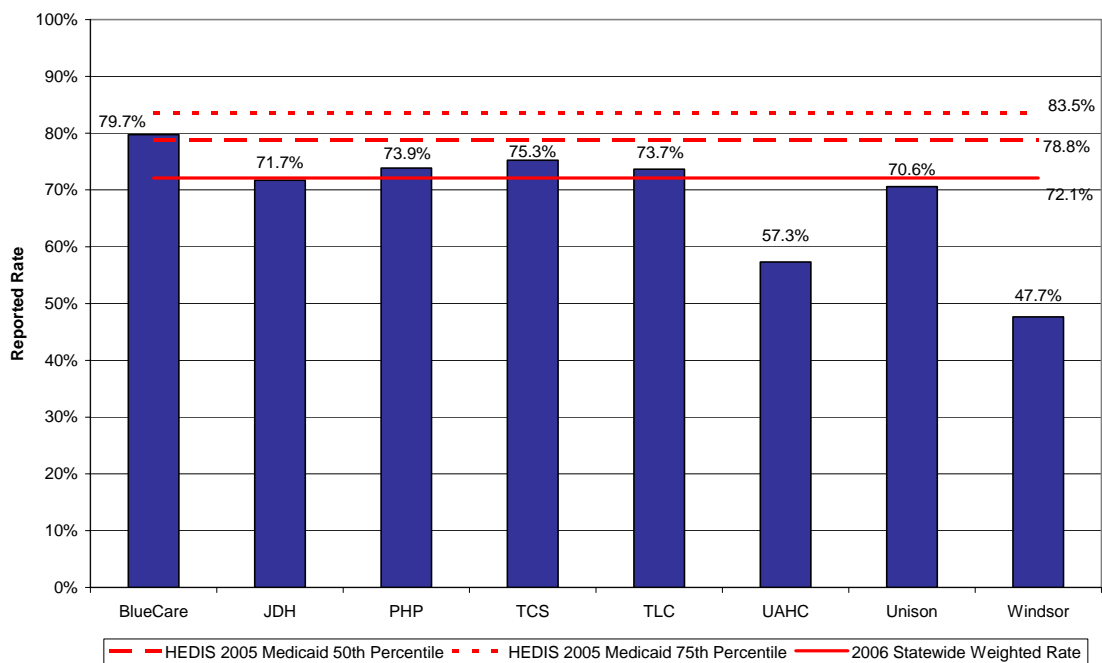




### TennCare Postpartum Care: HEDIS 2006 Rates

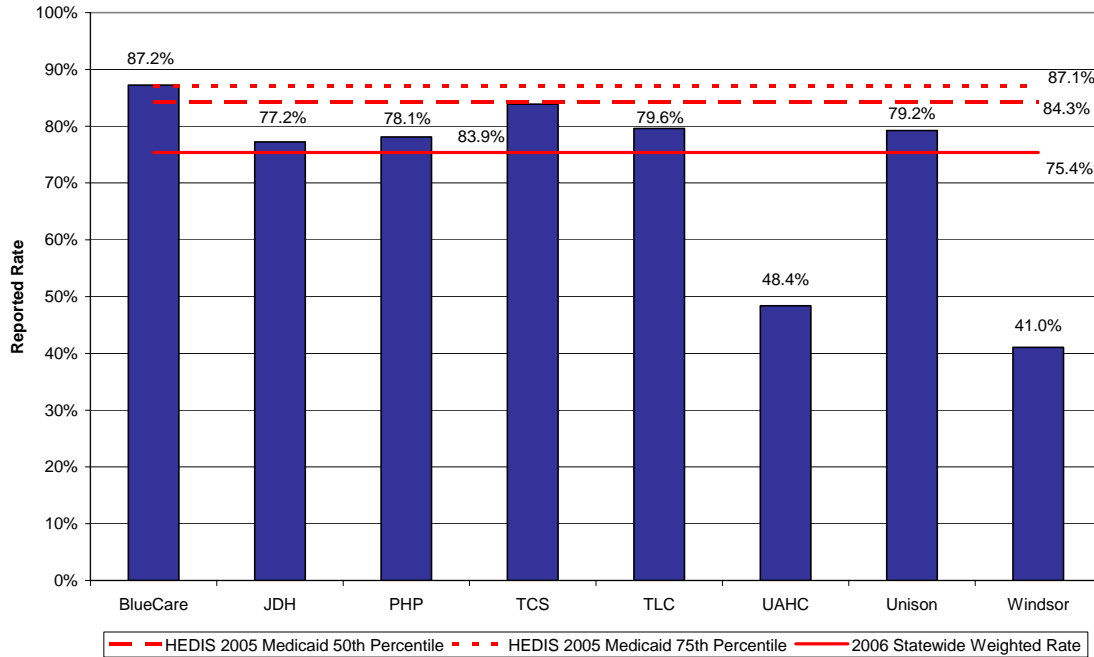


### TennCare Adults' Access to Preventive / Ambulatory Health Services 20-44 Year Olds: HEDIS 2006 Rates

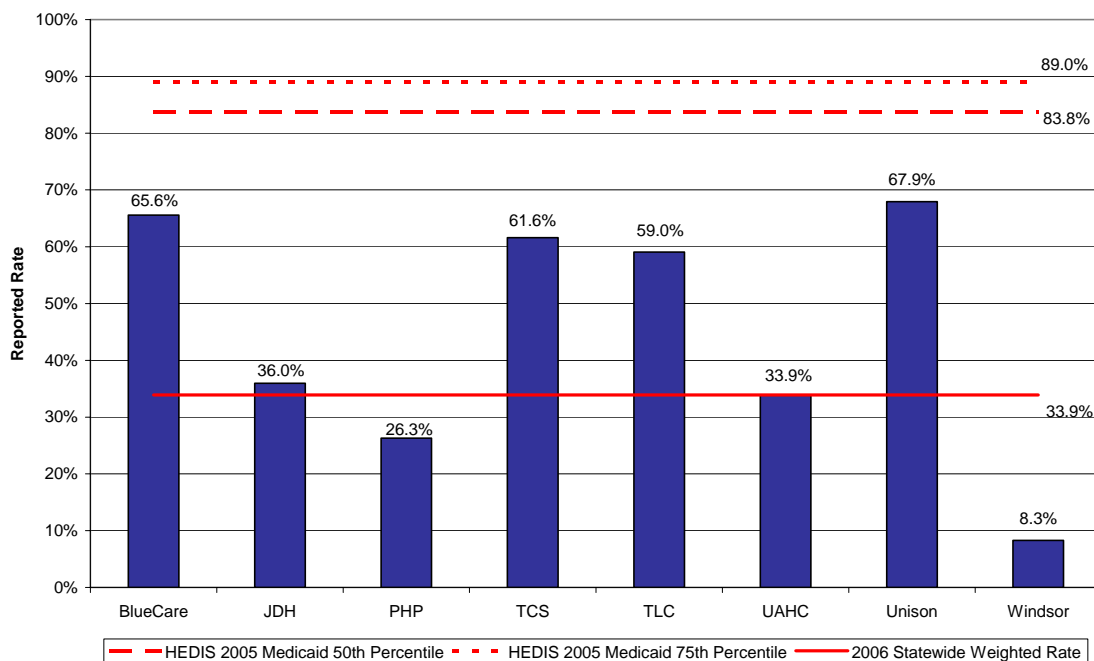




**TennCare Adults' Access to Preventive / Ambulatory Health Services 45-64 Year Olds: HEDIS 2006 Rates**

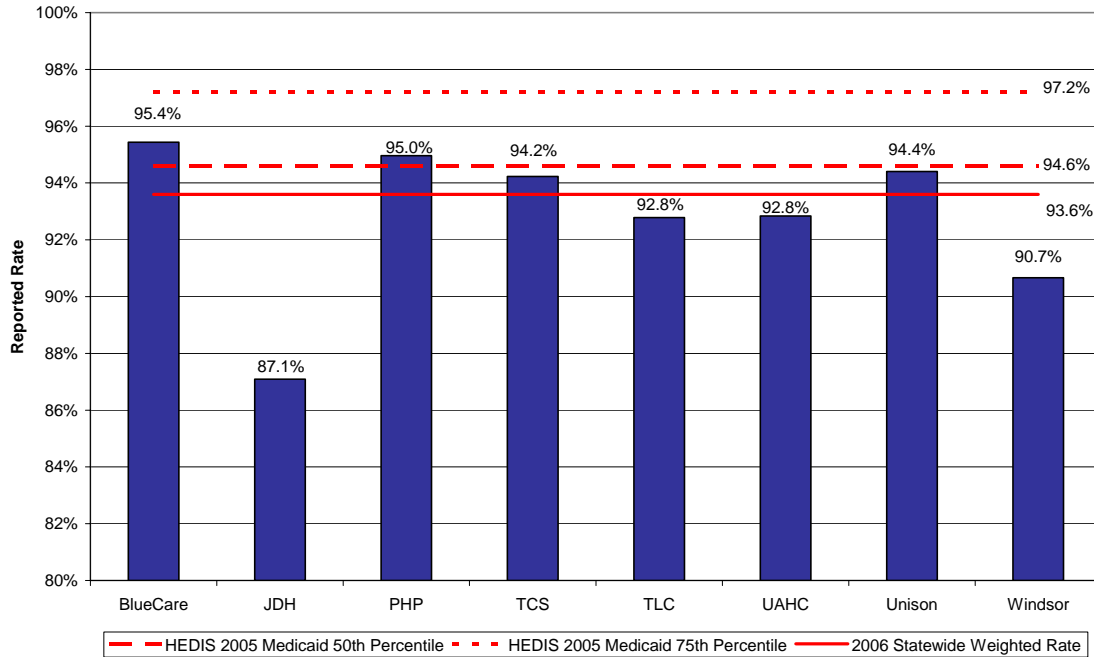


**TennCare Adults' Access to Preventive / Ambulatory Health Services >= 65 Years Old: HEDIS 2006 Rates**

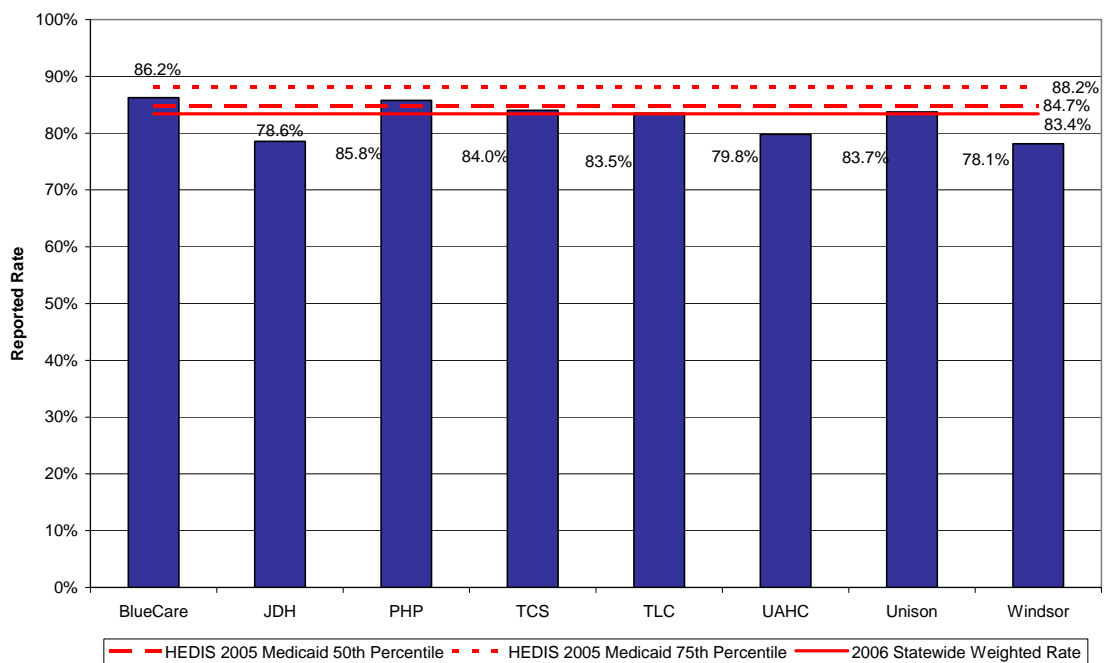




**TennCare Children and Adolescents' Access to Primary Care  
Practitioners 12-24 Months: HEDIS 2006 Rates**



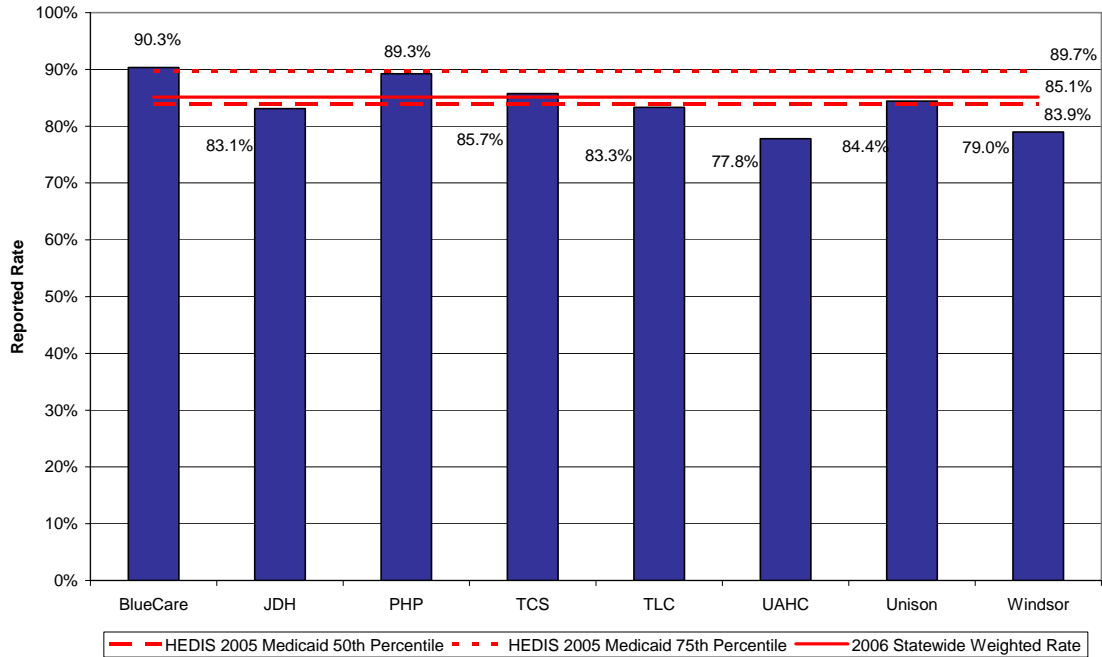
**TennCare Children and Adolescents' Access to Primary Care  
Practitioners 25 Months - 6 Year Olds: HEDIS 2006 Rates**



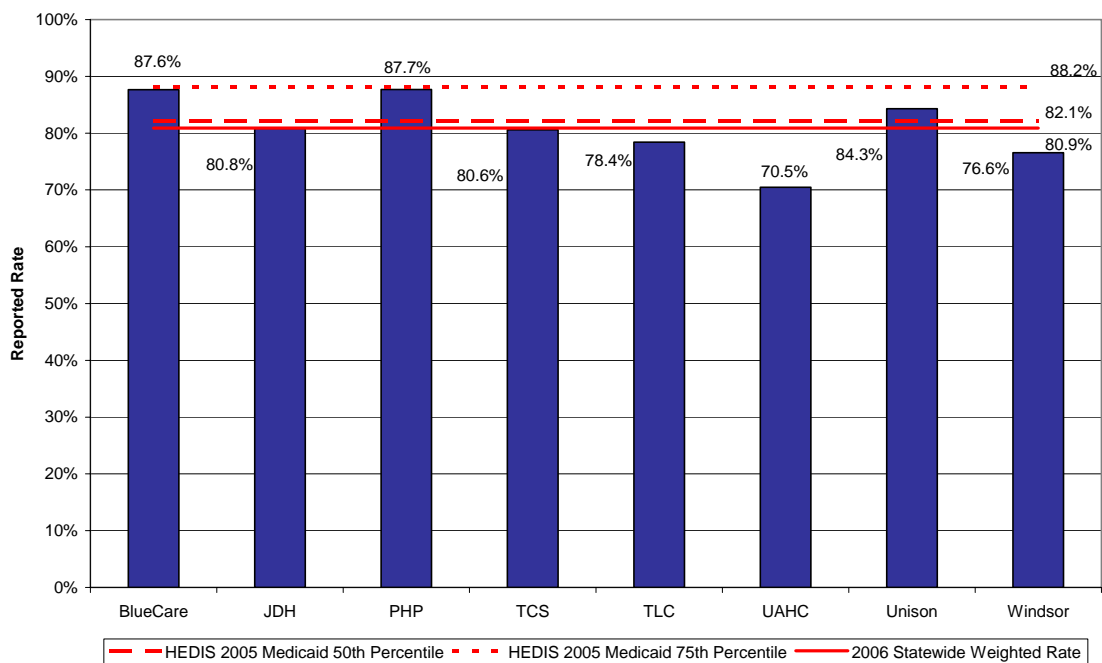




**TennCare Children and Adolescents' Access to Primary Care  
Practitioners 7-11 Year Olds: HEDIS 2006 Rates**



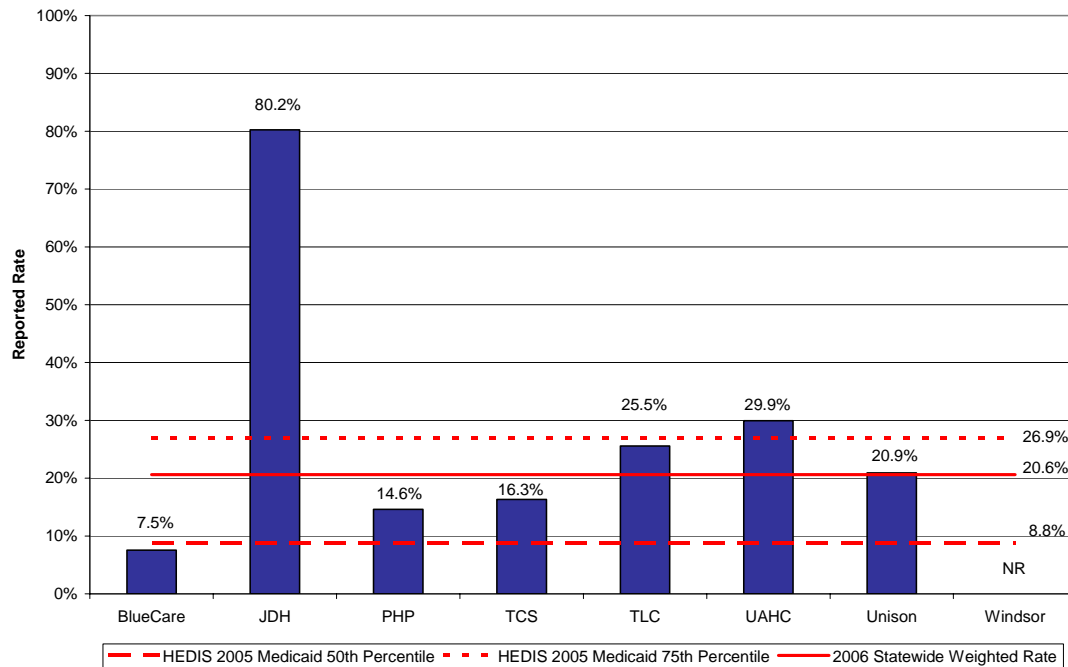
**TennCare Children and Adolescents' Access to Primary Care  
Practitioners 12-19 Year Olds: HEDIS 2006 Rates**



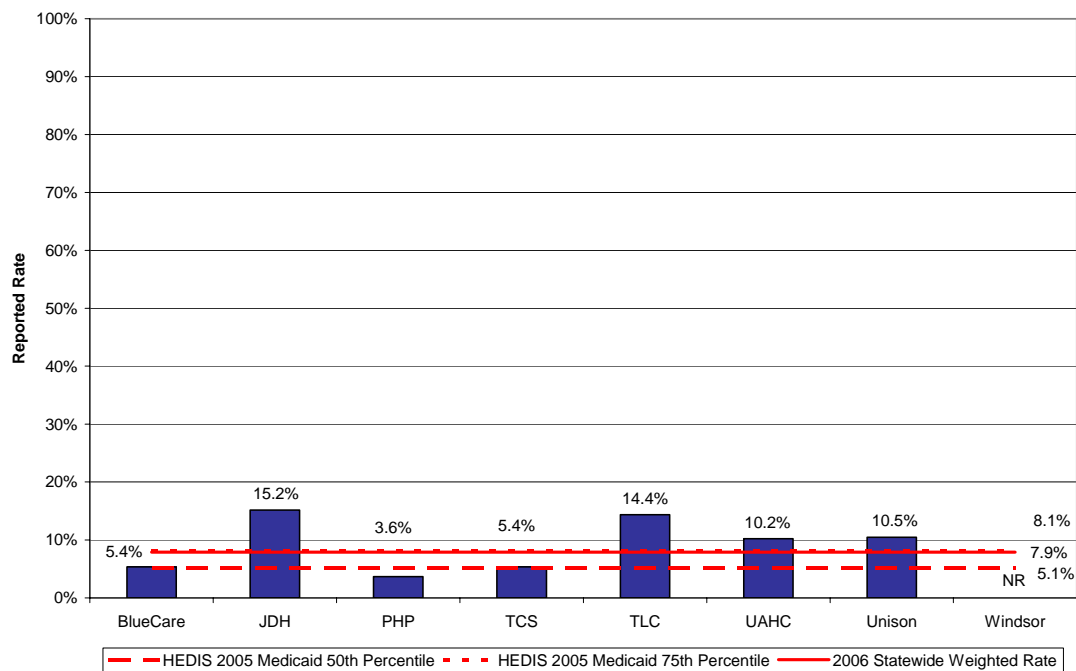


## Access / Availability of Care

**TennCare Frequency of Ongoing Prenatal Care <21 Percent: HEDIS 2006 Rates**

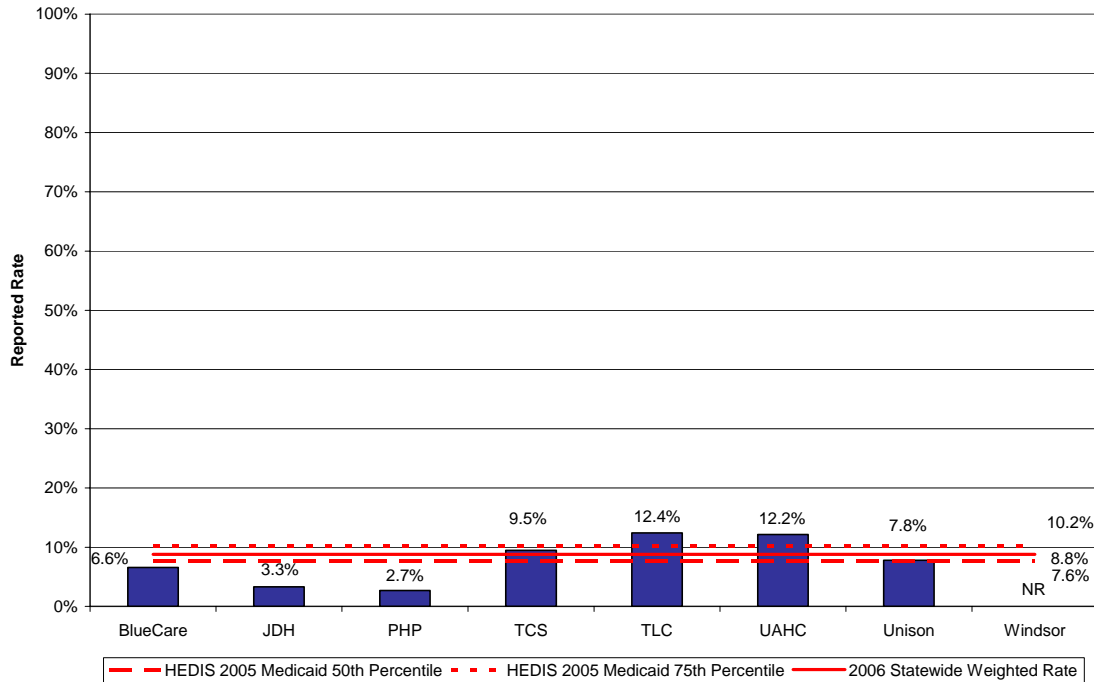


**TennCare Frequency of Ongoing Prenatal Care 21-40 Percent: HEDIS 2006 Rates**

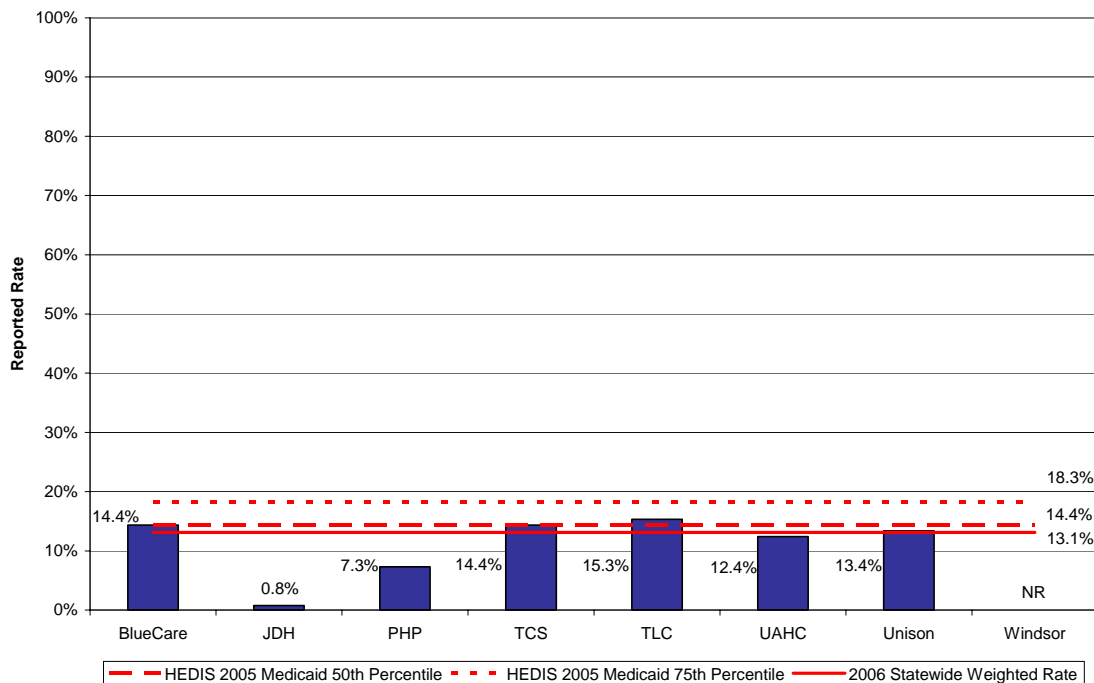




### TennCare Frequency of Ongoing Prenatal Care 41-60 Percent: HEDIS 2006 Rates

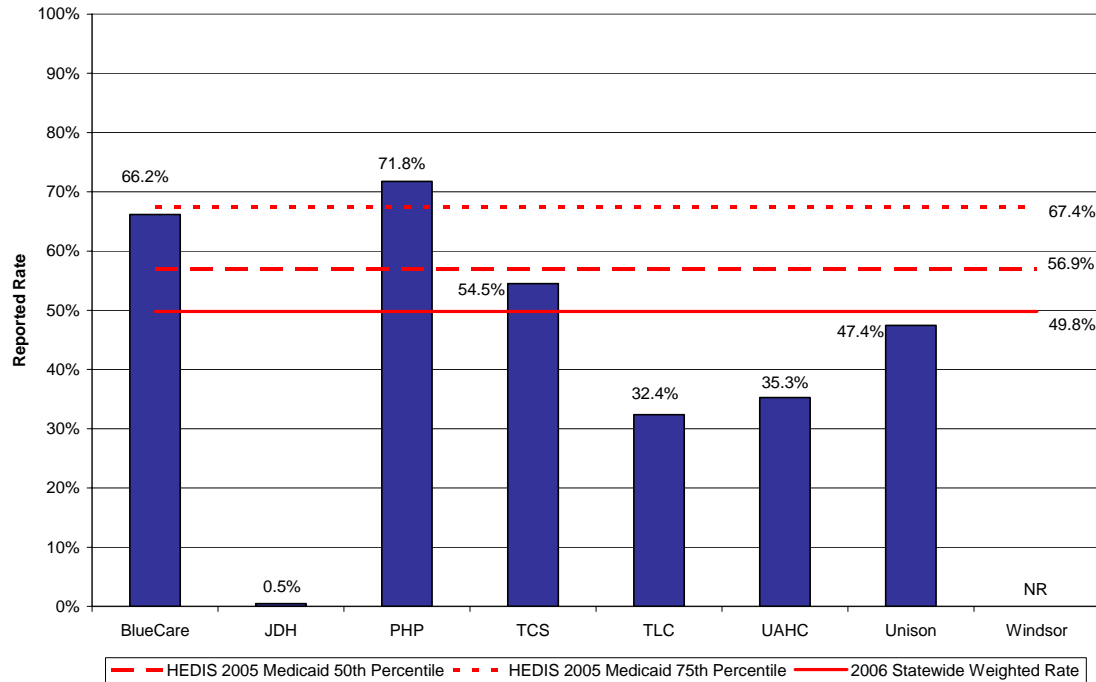


### TennCare Frequency of Ongoing Prenatal Care 61-80 Percent: HEDIS 2006 Rates

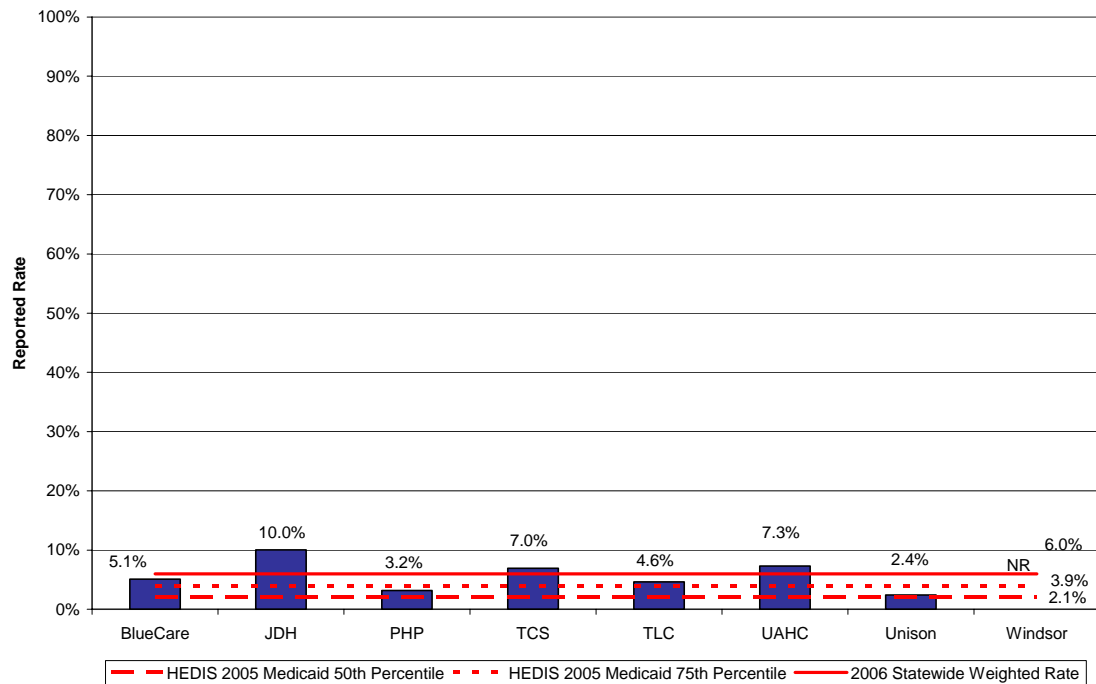




### TennCare Frequency of Ongoing Prenatal Care >= 81 Percent: HEDIS 2006 Rates

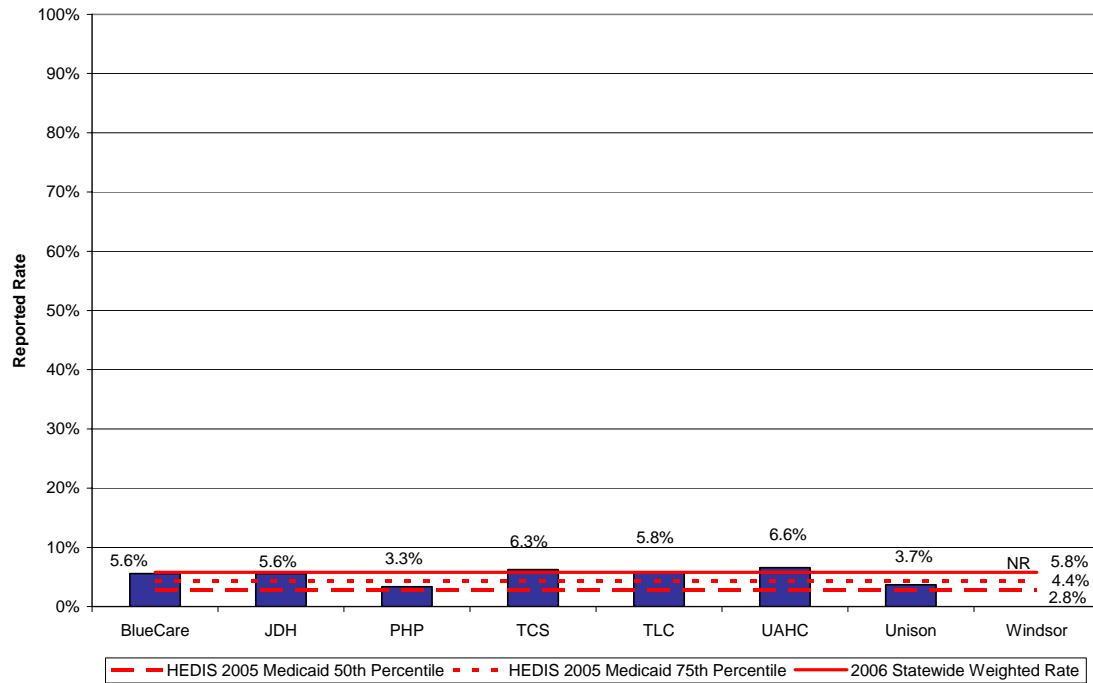


### TennCare Well-Child Visits in the First 15 Months of Life - 0 Visits: HEDIS 2006 Rates

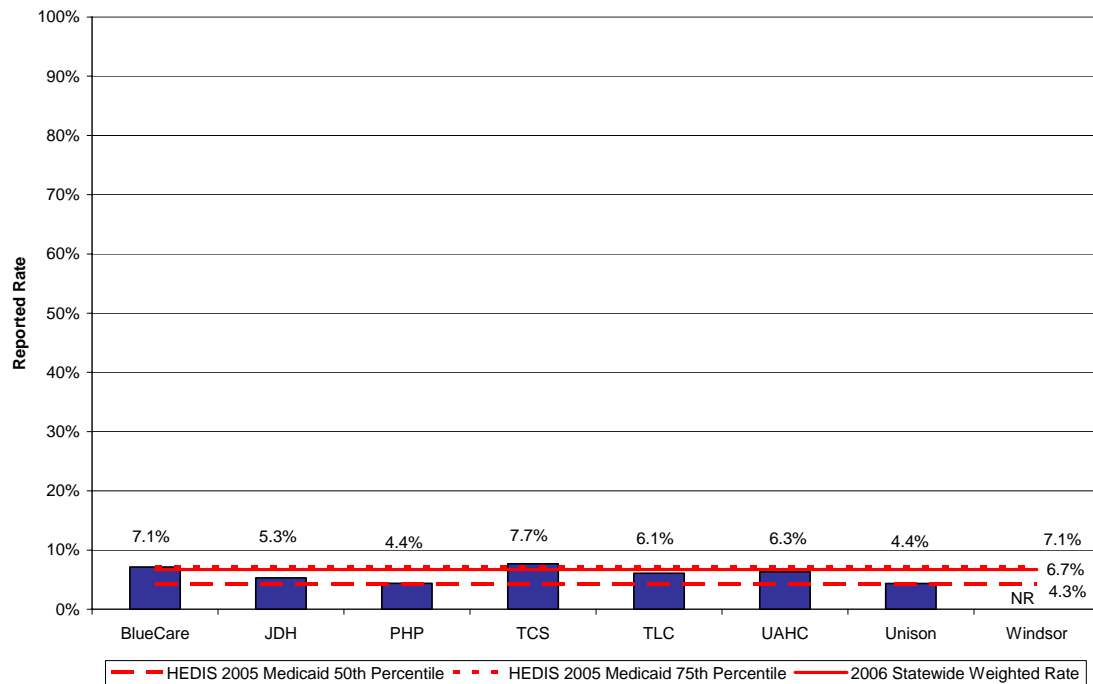




### TennCare Well-Child Visits in the First 15 Months of Life - 1 Visit: HEDIS 2006 Rates

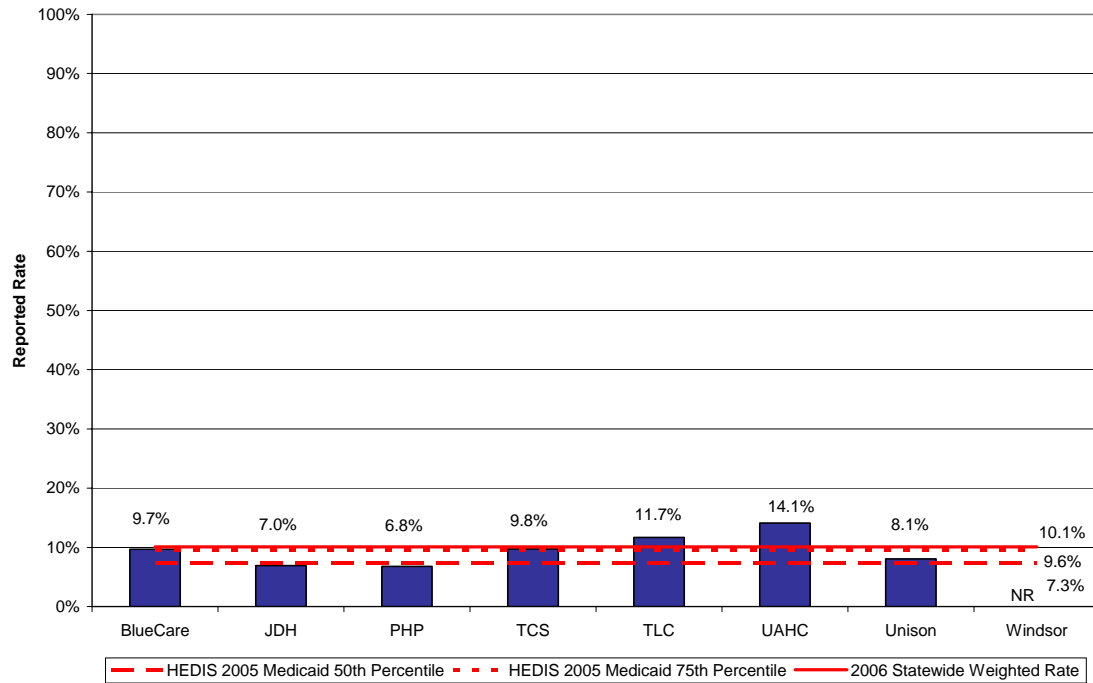


### TennCare Well-Child Visits in the First 15 Months of Life - 2 Visits: HEDIS 2006 Rates

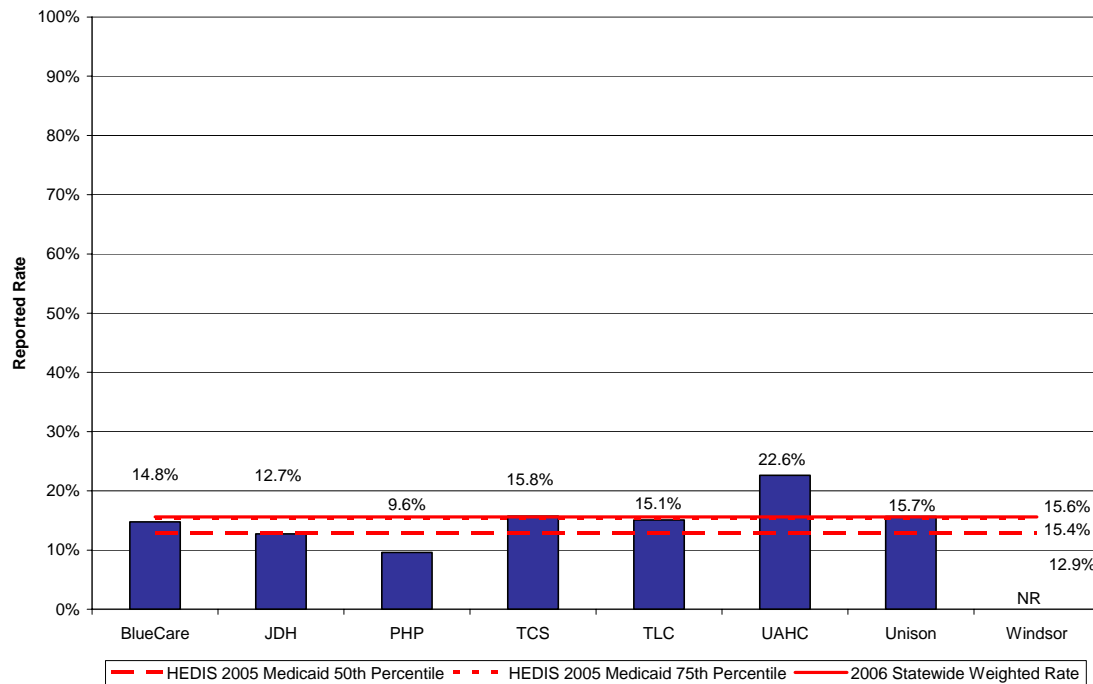




### TennCare Well-Child Visits in the First 15 Months of Life - 3 Visits: HEDIS 2006 Rates

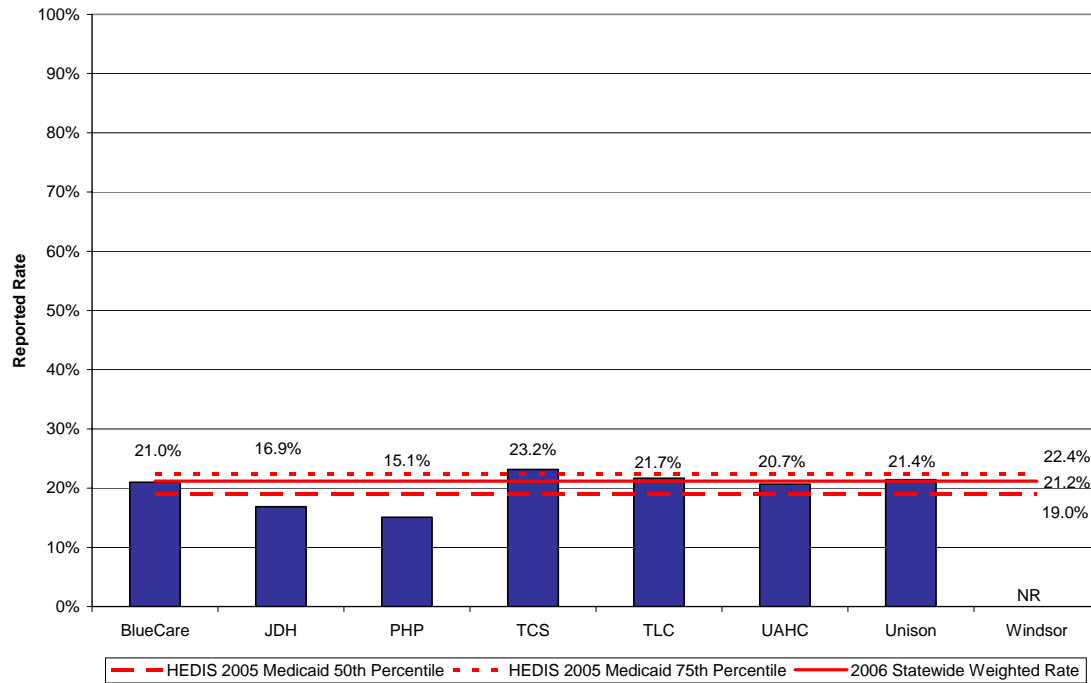


### TennCare Well-Child Visits in the First 15 Months of Life - 4 Visits: HEDIS 2006 Rates

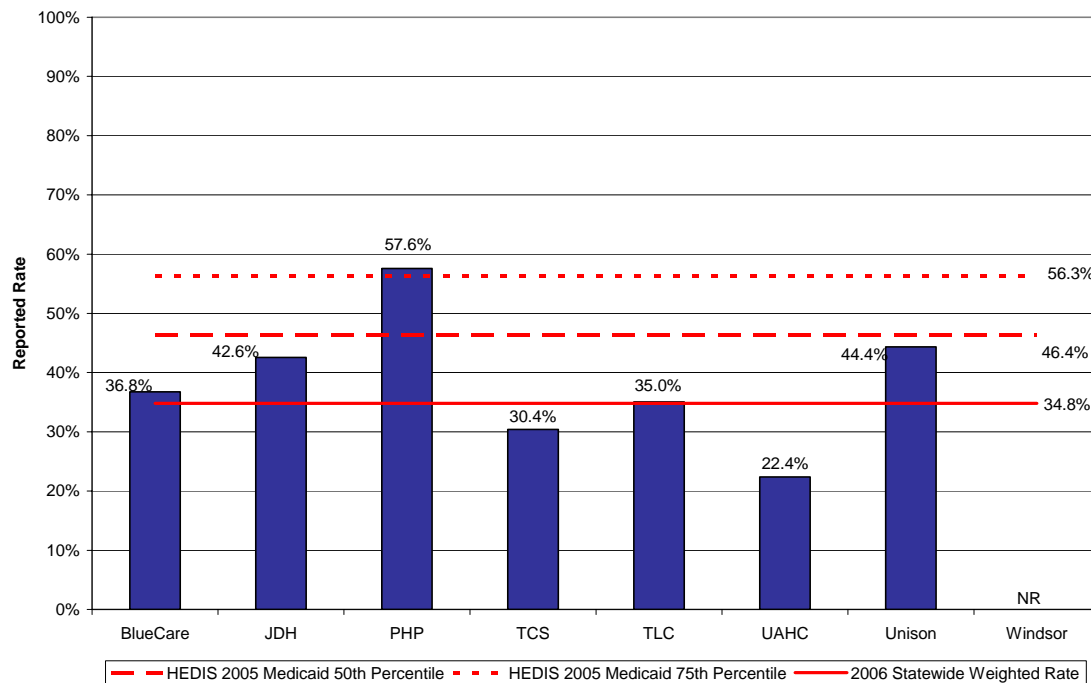




### TennCare Well-Child Visits in the First 15 Months of Life - 5 Visits: HEDIS 2006 Rates

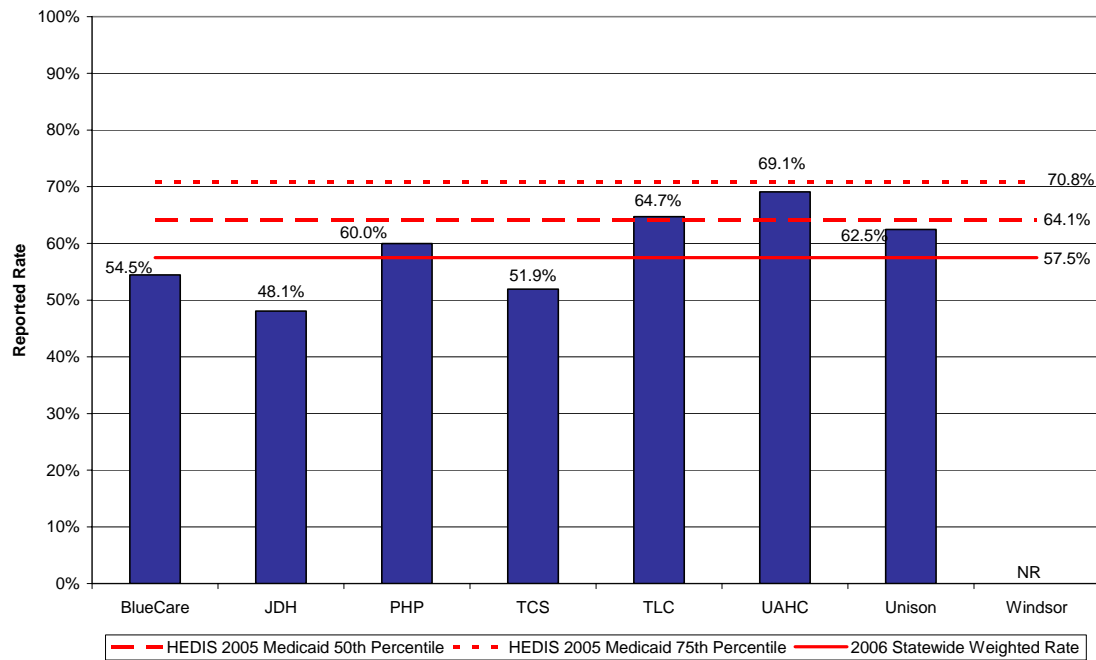


### TennCare Well-Child Visits in the First 15 Months of Life - >= 6 Visits: HEDIS 2006 Rates

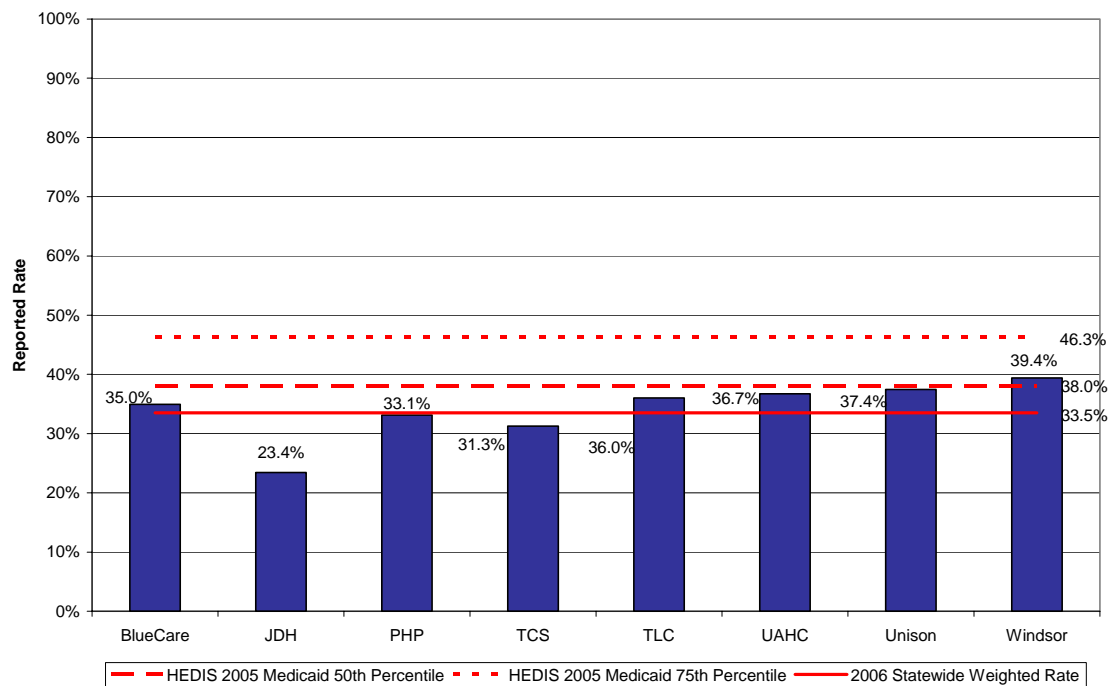




### TennCare Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life: HEDIS 2006 Rates



### TennCare Adolescent Well-Care Visits: HEDIS 2006 Rates







### 3. Strengths and Opportunities *for HEDIS/CAHPS*

This report compiles data from two years of HEDIS reporting for TennCare MCOs. During 2005, TennCare MCOs were required to report a limited set of HEDIS measures including: Childhood Immunization Status Combo 2, Adolescent Immunization Status Combo 2, Breast Cancer Screening, Cervical Cancer Screening, Comprehensive Diabetes Care – HbA1c Testing, and Timeliness of Prenatal Care and Postpartum Care, as well as one optional measure, Chlamydia Screening. From HEDIS 2005 to HEDIS 2006, TennCare MCOs demonstrated improvement in performance for all of required measures during HEDIS 2005. Improvement in three measures: Breast Cancer Screening, Cervical Cancer Screening, and Prenatal and Postpartum Care – Timeliness of Prenatal Care was statistically significant.

As TennCare MCOs are now mandated to achieve NCQA-accreditation by December 31, 2006, it was required that a broader set of measures be reported for HEDIS 2006 in conjunction with this process. While individual plan performance varies from HEDIS 2005 to HEDIS 2006, the Tennessee overall change is positive, demonstrating statewide improvement in these measures. For HEDIS 2006, many TennCare MCOs are performing at or above the national 75th percentile for several measures including: Childhood Immunization Status, Chlamydia Screening in Women, Use of Appropriate Medications for People with Asthma, and Well-Child Visits in the First 15 Months of Life. Some of the above average performance for certain measures may be attributed to the intensified MCO efforts centered on Early Periodic, Screening, Diagnosis, and Treatment programs within TennCare. Additionally, TennCare MCOs are performing above the national average for several components of the CAHPS 3.0 Medicaid Adult and Child surveys.

This report also helps to identify opportunities for improvement in areas such as adolescent immunizations, appropriate treatment of children with upper respiratory infection and pharyngitis, breast and cervical cancer screening, and facets of diabetes care. Increasing access to care is a long-standing challenge in the Medicaid population, as well as appropriate utilization of services by older children and adults.

TennCare MCOs should continue to work on these areas in particular and further develop existing interventions such as the current statewide collaborative focused on adolescent well-care visits. TennCare MCOs performing well in areas where statewide improvement may be needed should share best practices.

The following tables identify individual plan strengths and opportunities related to the HEDIS measures required for Medicaid MCOs seeking accreditation. The measures evaluated are as follows:



1. Childhood Immunization Status: Combo 2
2. Adolescent Immunization Status: Combo 2
3. Appropriate Treatment for Children with Upper Respiratory Infection
4. Appropriate Testing for Children with Pharyngitis
5. Breast Cancer Screening
6. Cervical Cancer Screening
7. Controlling High Blood Pressure
8. Comprehensive Diabetes Care
9. Appropriate Medications for People with Asthma
10. Prenatal and Postpartum Care
11. Medical Assistance with Smoking Cessation

For each MCO, the following tables present the number of HEDIS measures with reported results above the National HEDIS 2005 75<sup>th</sup> Percentile, any particular strengths noted with those measures, and measures where the plan might focus efforts to increase reported results.

Table 3-1 MCO Performance Summary for BlueCare			
HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	Childhood Immunization Status: Combo 2  Use of Appropriate Medications for People with Asthma (all numerators)	BlueCare maintains a childhood immunization Combo 2 rate above the national 75 <sup>th</sup> percentile. Further, this rate is the highest among TennCare MCOs.	BlueCare's rate of appropriate treatment for children with upper respiratory infection is below the national 25 <sup>th</sup> percentile.  BlueCare's Comprehensive Diabetes Care – Monitoring for Diabetic Nephropathy is below the national 25 <sup>th</sup> percentile.
<i>Access and Availability</i>	Timeliness of Prenatal Care  Postpartum Care	Blue care maintains prenatal and postpartum rates above the national 75 <sup>th</sup> percentile.	No opportunities noted.
Effectiveness of Care Survey Measure	Components Above Statewide Average	Strength	Opportunity
<i>Medical Assistance with Smoking Cessation</i>	Advising Smokers to Quit  Discussing Smoking Cessation Medications  Discussing Smoking Cessation Strategies	Rates for smoking cessation counseling across all three modalities are the highest among all TennCare MCOs.	No opportunities noted.

**Table 3-2 MCO Performance Summary for JDH**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	<p>Childhood Immunization Status: Combo 2</p> <p>Use of Appropriate Medications for People with Asthma (all numerators)</p>	<p>JDH maintains a childhood immunization Combo 2 rate above the national 75<sup>th</sup> percentile.</p> <p>JDH maintains the highest rate of appropriate medications for people with asthma across all age groups among the TennCare MCOs.</p>	<p>While Childhood Immunization Status rates are high, JDH's Adolescent Immunization Status Combo 2 rate is below the 25<sup>th</sup> percentile nationally. JDH should consider expanding their immunization outreach to address this population.</p> <p>JDH's rate of Appropriate Treatment for Children with Upper Respiratory Infection is below the national 25<sup>th</sup> percentile.</p> <p>Breast Cancer Screening and Cervical Cancer Screening rates are also below the national 25<sup>th</sup> percentile suggesting women's health care is an area to intensify interventions.</p> <p>Controlling High Blood Pressure and Comprehensive Diabetes Care Eye Exam rates represent an opportunity to focus preventive care efforts, as both indicators are also below the 25<sup>th</sup> percentile.</p>
<i>Access and Availability</i>	<p>Timeliness of Prenatal Care</p> <p>Postpartum Care</p>	<p>JDH maintains Prenatal and Postpartum Care rates above the national 75<sup>th</sup> percentile rate.</p>	<p>No opportunities noted.</p>
<b>Effectiveness of Care Survey Measure</b>	<b>Components Above Statewide Average</b>	<b>Strength</b>	<b>Opportunity</b>
<i>Medical Assistance with Smoking Cessation</i>	<p>Advising Smokers to Quit</p> <p>Discussing Smoking Cessation Strategies</p>	<p>Two components of this measure are above the statewide average.</p>	<p>JDH's rate of Discussing Smoking Cessation Medications at 24.2% is well below the statewide average. This rate is also among the lowest among TennCare MCOs.</p>

**Table 3-3 MCO Performance Summary for PHP**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	<p>Childhood Immunization Status: Combo 2</p> <p>Use of Appropriate Medications for People with Asthma (all numerators)</p>	<p>PHP maintains a Childhood Immunization Status Combo 2 rate above the national 75<sup>th</sup> percentile.</p> <p>PHP has performed above the 75<sup>th</sup> percentile for all numerators of Use of Appropriate Medications for People with Asthma.</p>	<p>PHP's rate of Appropriate Treatment for Children with Upper Respiratory Infection is below the national 25<sup>th</sup> percentile.</p> <p>PHP's Breast Cancer Screening rate is below the national 25<sup>th</sup> percentile suggesting the need to focus on women's health as an opportunity to improve care.</p> <p>PHP's Comprehensive Diabetes Care – Monitoring for Diabetic Nephropathy is below the national 25<sup>th</sup> percentile.</p>
<i>Access and Availability</i>	Postpartum Care	PHP maintains Postpartum Care rates above the national 75 <sup>th</sup> percentile.	Timeliness of Prenatal Care, at 76.9%, is the lowest among TennCare MCOs, but higher than the 25 <sup>th</sup> percentile nationally.
Effectiveness of Care Survey Measure	Components Above Statewide Average	Strength	Opportunity
<i>Medical Assistance with Smoking Cessation</i>		No strengths noted.	All components of Medical Assistance with Smoking Cessation fall below the statewide average.

**Table 3-4 MCO Performance Summary for TCS**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	<p>Childhood Immunization Status: Combo 2</p> <p>Use of Appropriate Medications for People with Asthma (all numerators)</p>	<p>TCS maintains a Childhood Immunization Status Combo 2 rate above the national 75<sup>th</sup> percentile.</p> <p>TCS rates for all components of Use of Appropriate Medications for People with Asthma are above the 75<sup>th</sup> percentile.</p>	<p>TCS' rate of Appropriate Treatment for Children with Upper Respiratory Infection is below the national 25<sup>th</sup> percentile.</p> <p>TCS' Comprehensive Diabetes Care – Monitoring for Diabetic Nephropathy is below the national 25<sup>th</sup> percentile.</p>
<i>Access and Availability</i>		No Strengths noted.	No opportunities noted.
Effectiveness of Care Survey Measure	Components Above Statewide Average	Strength	Opportunity
<i>Medical Assistance with Smoking Cessation</i>	<p>Advising Smokers to Quit</p> <p>Discussing Smoking Cessation Medications</p> <p>Discussing Smoking Cessation Strategies</p>	TCS's rates for all components of Medical Assistance with Smoking Cessation are second only to BlueCare in TennCare performance.	No opportunities noted.

**Table 3-5 MCO Performance Summary for TLC**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	Use of Appropriate Medications for People with Asthma (all numerators)	TLC has performed above the 75 <sup>th</sup> percentile for all numerators of Use of Appropriate Medications for People with Asthma.	Multiple areas of opportunity exist to improve measures within the Effectiveness of Care Domain. Adolescent Immunization Status Combo 2, Appropriate Treatment for Children with Upper Respiratory Infection, and Controlling High Blood Pressure rates are the lowest among TennCare MCOs.  Additionally, comprehensive diabetes care components: Eye Exams, LDL-C levels, Poor Control of HbA1c, and Monitoring for Nephropathy rates are below the 25 <sup>th</sup> percentile and indicate a need to focus on improved diabetes care management.
<i>Access and Availability</i>			Measures for both prenatal and postpartum care are below the national 25th percentile.
Effectiveness of Care Survey Measure	Components Above Statewide Average	Strength	Opportunity
<i>Medical Assistance with Smoking Cessation</i>	NA	NA	NA

**Table 3-6 MCO Performance Summary for UAHC**

HEDIS Measure Domain	Measures above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	<p>Appropriate Treatment of Children with Upper Respiratory Infection</p> <p>Use of Appropriate Medications for People with Asthma (all numerators except 18-56 year olds)</p>	<p>UAHC maintains an Appropriate Treatment of Children with Upper Respiratory Infection rate above the national 75<sup>th</sup> percentile rate. This rate is among the highest of all TennCare MCOs.</p> <p>Use of Appropriate Medications for People with Asthma rate is above the 75<sup>th</sup> percentile for all numerators except 18-56 year olds.</p>	<p>Adolescent Immunization Status Combo 2 rate is among the lowest for TennCare MCOs and below the national 25<sup>th</sup> percentile.</p> <p>Breast Cancer Screening and Cervical Cancer Screening rates are also below the national 25<sup>th</sup> percentile suggesting the need to focus on women's health as an opportunity to improve care.</p> <p>UAHC's Comprehensive Diabetes Care – Monitoring for Diabetic Nephropathy is below the national 25<sup>th</sup> percentile.</p>
<i>Access and Availability</i>		No strengths noted	UAHC's Timeliness of Prenatal Care rate is below the national 25 <sup>th</sup> percentile.
Effectiveness of Care Survey Measure	Components Above Statewide Average	Strength	Opportunity
<i>Medical Assistance with Smoking Cessation</i>	NA	NA	NA

**Table 3-7 MCO Performance Summary for Unison**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	Use of Appropriate Medications for People with Asthma (all numerators)	Unison maintains a Use of Appropriate Medications for People with Asthma rate above the national 75 <sup>th</sup> percentile.	<p>Adolescent Immunization Status Combo 2 and Appropriate Treatment for Children with Upper Respiratory Infection rates are below the national 25<sup>th</sup> percentile.</p> <p>Comprehensive Diabetes Care components: Eye Exams, LDL-C Level, Poor HbA1c Control, and Monitoring for Nephropathy indicate a need to focus on improved diabetic patient management.</p> <p>Controlling High Blood Pressure represents an opportunity to focus preventive care efforts as this indicator is also below the 25<sup>th</sup> percentile.</p>
<i>Access and Availability</i>		No strengths noted.	The Prenatal and Postpartum Care measure is below the national 25 <sup>th</sup> percentile for both components.
<b>Effectiveness of Care Survey Measure</b>	<b>Components Above Statewide Average</b>	<b>Strength</b>	<b>Opportunity</b>
<i>Medical Assistance with Smoking Cessation</i>		No strengths noted.	All components of Medical Assistance with Smoking Cessation fall below the statewide average.



**Table 3-8 MCO Performance Summary for Windsor**

HEDIS Measure Domain	Measures Above 75 <sup>th</sup> Percentile	Strength	Opportunity
<i>Effectiveness of Care</i>	<p>Appropriate Treatment of Children with Upper Respiratory Infection</p> <p>Appropriate Testing for Children with Pharyngitis</p> <p>Use of Appropriate Medications for People with Asthma (all numerators)</p>	Several childhood treatment measures demonstrate performance above the national 75 <sup>th</sup> percentiles.	<p>Childhood Immunization Status Combo 2 and Adolescent Immunization Status Combo 2 are below the 25<sup>th</sup> percentile and are the lowest among TennCare MCOs.</p> <p>Breast Cancer Screening and Cervical Cancer Screening rates are also below the national 25<sup>th</sup> percentile suggesting the need to focus on women's health as an opportunity to improve care.</p> <p>Comprehensive Diabetes Care Components: HbA1c Testing, Eye Exam, LDL-C Level, and Poor HbA1c Control indicate a need to focus on improved diabetic patient management.</p>
<i>Access and Availability</i>		No strengths noted.	The Prenatal and Postpartum Care measure is below the national 25 <sup>th</sup> percentile for both components.
<b>Effectiveness of Care Survey Measure</b>	<b>Components Above Statewide Average</b>	<b>Strength</b>	<b>Opportunity</b>
<i>Medical Assistance with Smoking Cessation</i>	Discussing Smoking Cessation Medications	Windsor's Discussing Smoking Cessation Medications is above the statewide average.	Advising Smokers to Quit and Discussing Smoking Cessation Strategies are below the statewide average.